

Wisconsin Home Health Agency Directory

2000

November 2001

Bureau of Health Information
Division of Health Care Financing
Department of Health and Family Services

Suggested citation:

Wisconsin Department of Health and Family Services, Division of Health Care Financing, Bureau of Health Information, *Wisconsin Home Health Agency Directory, 2000* (PHC 5317). November 2001.

FOREWORD

Chapter 50.49, Wisconsin Statutes, authorizes and directs the Department of Health and Family Services (DHFS) to develop rules for the licensure of all home health agencies serving Wisconsin residents (Wisconsin Administrative Code, HFS 133, Home Health Agencies). These rules include requirements for reporting information on home health agencies to DHFS through the submittal of licensure application forms provided by the Department. Attached to the licensure application is a survey form from the Wisconsin Bureau of Health Information. This survey serves as a coordinated data collection effort designed to meet the Department's program needs. The information collected is used by various bureaus within the Department for planning purposes, as cited in the statutes referenced in the body of the licensure application.

The agency profiles presented in this directory are based on survey data collected for the 2000 calendar year. Each agency profile also includes results of a one-day, point-in-time profile of residents served by the agency on December 7, 2000. The licensure application to which the survey was attached is for the period June 1, 2001 through May 31, 2002. The Bureau of Health Information would like to thank the home health agencies for their participation in the annual surveys.

This directory was produced by the Wisconsin Department of Health and Family Services, Division of Health Care Financing, Bureau of Health Information. Jane Conner, research analyst, prepared the directory. She also coordinated and implemented the data collection and editing activities. Kitty Klement, research analyst, and Lu Ann Hahn and Kim Voss, research technicians, participated in the survey follow-up process. The directory was prepared under the supervision of Raúl Rodríguez-Medellín, Chief, Workforce and Provider Survey Section, and the overall direction of Sandra Breitborde, Director of the Bureau of Health Information.

Inquiries concerning the information presented in this publication should be directed to the Bureau of Health Information, Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309, or telephone (608) 267-9055.

Many of the publications produced by the Bureau of Health Information can be found online, at www.dhfs.state.wi.us/stats.

To obtain an additional copy of this directory, please send a \$15.00 check (made payable to the Division of Health Care Financing), along with a note requesting the 2000 Home Health Agency Directory, to the following address:

Bureau of Health Information
Division of Health Care Financing
ATTN: Joan Gugel
P.O. Box 309
Madison WI 53701-0309

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INTRODUCTION

Home health agencies have been an integral part of the Wisconsin health care delivery system since the early 1960s. The Annual Survey of Home Health Agencies was begun in 1984 to systematically collect information about the characteristics of home health agencies and the patients they served. The purpose of the survey is to generate information useful to home health agency administrators, public and private health care professionals, and other interested citizens.

This directory presents data for the 155 home health agencies that submitted an application for an annual report for 2000. Agency profiles include detailed information about individual home health agencies for 2000 and a one-day, point-in-time profile of residents served on December 7, 2000. The agency profiles are organized alphabetically by county of location, and by city within each county. The indices included at the back of this directory list all agencies statewide by county, city, name of agency, and license number assigned to each agency by the Bureau of Quality Assurance, Division of Supportive Living.

Data contained in each profile are agency-specific and appear most frequently in the form of percentages. Caution should be used when comparing percentages for agencies with small numbers of patients because of the high potential for variability. Throughout these profiles, a " ." in any category indicates that the data were not provided by the agency.

The following information is presented for each agency:

1. Identifying information, including agency name, address, city, zip code, county, telephone number and license number.
2. Agency characteristics, such as type of ownership, certification for Medicare (Title 18) and Medicaid (Title 19), any affiliation with a hospital, and counties served by the agency.
3. Agency utilization measures, including the number of patients, visits and visits per patient by type of service.
4. Profiles of the percentage of patients served during the year, by patients' age, sex, reimbursement source and primary diagnosis. The profiles of the percentage of patients by age, sex and primary diagnosis describe an unduplicated count of patients served during calendar year 2000. The profile by reimbursement source is based on the agency's last completed fiscal year and describes a duplicated count of patients.
5. Revenue and expenses for the agency's last completed fiscal year.
6. The percentage of admissions by referral source and the discharge status or care destination for patients discharged.
7. Number of full-time equivalent employees (FTEs). Staffing data does not include information about consultants or contracted staff.

To assist the reader in converting the percentages shown in each profile to a comparable number of patients, an example is provided using data from the St. Joseph's Hospital Home Health Agency in Chippewa Falls (Page 15). To calculate the number of patients served by this agency who were age 75 to 84, divide the percentage for the age group (36.0) by 100 (.360) and multiply the result by the total number of patients served during the year (586). The product (.360 x 586) is 210.96, which when rounded to 211 is the number of unduplicated patients age 75 to 84 served by this agency during the 2000 calendar year.

Home Health Agency Profiles

Adams County Memorial Hospital Association

450 East State Street

Adams WI 53910

Adams County

(608) 339-7076

COUNTIES SERVED

Adams

Columbia

Juneau

Marquette

Waushara

Wood

License Number: 139

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 19

Number of unduplicated patients in 2000 = 196

TOTAL NUMBER OF ADMISSIONS 201**PERCENT ADMISSIONS FROM:**

Private Residences 21.4%

General Hospitals 65.7

Nursing Homes 8.0

Other 5.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 207

PERCENT DISCHARGES TO:

Private Residences 72.0%

General Hospitals 4.8

Nursing Homes 5.8

Deaths 6.8

Other 10.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	196	2,068	10.6
Home Health Aide	70	960	13.7
Physical Therapy	60	302	5.0
Spch/Occ/Resp Therapy	23	58	2.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	114	3,595	31.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,983	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 66.7%
4 to 24 0.5	Medicaid 26.0
25 to 54 8.7	Other Federal 0.0
55 to 64 9.7	State Funds 0.0
65 to 74 20.4	Private Insurance 7.3
75 to 84 32.1	Self Pay 0.0
85 & over 28.1	Other 0.0
	TOTAL PATIENTS 219

Males 38.8% Females 61.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 2.6%
Cancer 8.2	Genitourinary Sys. 4.1
Diabetes 6.6	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 11.7
Dementia/Alzheimers 0.0	Osteopathies 1.0
Psychoses/Neuroses 1.0	Perinatal Period 0.0
Central Nervous Sys. 2.0	Ill-Defined Cond. 6.1
Paralysis/CP 0.5	Fractures 9.7
Cardiovascular 15.3	Wounds, Burns 4.1
Stroke 2.0	Compl. of Surgery 1.5
Respiratory 8.7	Other Conditions 12.8

REVENUE

Billings \$	373,751
Disallowances	49,476
Collections	324,275
Other	0
Total	324,275

EXPENSES

Total \$	396,105
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.6
Licensed Practical Nurses	0.0
Home Health Aides	0.4
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.5
Homemakers	0.0
Other Staff	1.9
TOTAL FTEs	10.5

Ashland County Home Health Agency

301 Ellis Avenue

Ashland WI 54806

Ashland County

COUNTIES SERVED

Ashland

(715) 682-7028

License Number: 7

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 19

Number of unduplicated patients in 2000 = 156

TOTAL NUMBER OF ADMISSIONS 170**PERCENT ADMISSIONS FROM:**

Private Residences 5.3%

General Hospitals 20.6

Nursing Homes 10.0

Other 64.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	134	1,483	11.1
Home Health Aide	28	375	13.4
Physical Therapy	38	198	5.2
Spch/Occ/Resp Therapy	4	5	1.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	76	7,128	93.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,189	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 172

PERCENT DISCHARGES TO:

Private Residences 49.4%

General Hospitals 28.5

Nursing Homes 15.1

Deaths 0.0

Other 7.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 43.1%
4 to 24 0.6	Medicaid 36.5
25 to 54 9.0	Other Federal 5.5
55 to 64 5.8	State Funds 1.1
65 to 74 18.6	Private Insurance 9.4
75 to 84 26.9	Self Pay 4.4
85 & over 39.1	Other 0.0
	TOTAL PATIENTS 181

Males 32.7% Females 67.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.6%	Digestive Disorders 1.3%
Cancer 4.5	Genitourinary Sys. 2.6
Diabetes 3.2	Preg. & Childbirth 0.0
Diseases of Blood 5.8	Arthropathies 20.5
Dementia/Alzheimers 2.6	Osteopathies 2.6
Psychoses/Neuroses 1.9	Perinatal Period 0.0
Central Nervous Sys. 2.6	Ill-Defined Cond. 3.8
Paralysis/CP 0.6	Fractures 7.1
Cardiovascular 14.1	Wounds, Burns 3.8
Stroke 4.5	Compl. of Surgery 1.3
Respiratory 7.7	Other Conditions 9.0

REVENUE

Billings \$	432,103
Disallowances	82,215
Collections	349,888
Other	114,184
Total	464,072

EXPENSES

Total \$	399,452
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 2.0

Registered Nurses 4.0

Licensed Practical Nurses 0.0

Home Health Aides 0.1

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 0.3

Homemakers 0.0

Other Staff 3.0

TOTAL FTEs 10.5

Bay Area Home Health Service

1601 Beaser Avenue

Ashland WI 54806

Ashland County

(715) 682-9500

COUNTIES SERVED

Ashland

Bayfield

Iron

Vilas

License Number: 251

Ownership of Agency: Individual Proprietary

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 69

Number of unduplicated patients in 2000 = 180

TOTAL NUMBER OF ADMISSIONS 142**PERCENT ADMISSIONS FROM:**

Private Residences 13.4%

General Hospitals 28.9

Nursing Homes 16.9

Other 40.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	89	1,271	14.3
Home Health Aide	26	619	23.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	284	43,070	151.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	110	51,733	470.3
TOTAL	XXXXXXX	96,693	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 142

PERCENT DISCHARGES TO:

Private Residences 23.9%

General Hospitals 39.4

Nursing Homes 4.2

Deaths 5.6

Other 26.8

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 21.1%
4 to 24 2.8	Medicaid 66.1
25 to 54 15.0	Other Federal 0.0
55 to 64 16.1	State Funds 1.7
65 to 74 18.3	Private Insurance 5.6
75 to 84 21.7	Self Pay 5.6
85 & over 25.6	Other 0.0
	TOTAL PATIENTS 180

Males 36.1% Females 63.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.7%	Digestive Disorders 1.7%
Cancer 5.6	Genitourinary Sys. 2.8
Diabetes 6.7	Preg. & Childbirth 0.0
Diseases of Blood 2.8	Arthropathies 10.6
Dementia/Alzheimers 5.6	Osteopathies 1.1
Psychoses/Neuroses 8.3	Perinatal Period 0.0
Central Nervous Sys. 3.3	Ill-Defined Cond. 6.1
Paralysis/CP 2.2	Fractures 1.1
Cardiovascular 10.6	Wounds, Burns 1.7
Stroke 7.8	Compl. of Surgery 0.6
Respiratory 3.9	Other Conditions 16.1

REVENUE

Billings \$	1,572,102
Disallowances	133,284
Collections	1,438,818
Other	21,111
Total	1,459,929

EXPENSES

Total \$	1,404,534
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.2
Registered Nurses	2.2
Licensed Practical Nurses	0.0
Home Health Aides	0.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	19.1
Homemakers	25.3
Other Staff	5.3
TOTAL FTEs	53.4

Lakeview Medical Center

1100 North Main Street

Rice Lake WI 54868

Barron County

(715) 236-6256

COUNTIES SERVED

Barron

Rusk

Sawyer

Washburn

License Number: 151

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 23

Number of unduplicated patients in 2000 = 417

TOTAL NUMBER OF ADMISSIONS 406**PERCENT ADMISSIONS FROM:**

Private Residences 19.2%

General Hospitals 69.0

Nursing Homes 9.4

Other 2.5

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 410

PERCENT DISCHARGES TO:

Private Residences 74.9%

General Hospitals 13.9

Nursing Homes 2.7

Deaths 2.4

Other 6.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	417	4,904	11.8
Home Health Aide	192	5,921	30.8
Physical Therapy	150	350	2.3
Spch/Occ/Resp Therapy	51	150	2.9
Medical Social Service	38	65	1.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,390	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.2%	Medicare 79.8%
4 to 24 1.7	Medicaid 5.5
25 to 54 6.2	Other Federal 0.5
55 to 64 9.4	State Funds 0.0
65 to 74 19.9	Private Insurance 11.2
75 to 84 43.6	Self Pay 2.8
85 & over 18.9	Other 0.2
	TOTAL PATIENTS 436

Males 37.4% Females 62.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.2%	Digestive Disorders 3.8%
Cancer 10.8	Genitourinary Sys. 2.6
Diabetes 4.1	Preg. & Childbirth 0.2
Diseases of Blood 2.9	Arthropathies 13.9
Dementia/Alzheimers 0.2	Osteopathies 1.7
Psychoses/Neuroses 0.2	Perinatal Period 0.2
Central Nervous Sys. 0.7	Ill-Defined Cond. 3.1
Paralysis/CP 1.2	Fractures 10.8
Cardiovascular 15.8	Wounds, Burns 3.1
Stroke 5.5	Compl. of Surgery 3.1
Respiratory 6.2	Other Conditions 8.4

REVENUE

Billings	\$ 1,144,994
Disallowances	273,464
Collections	871,530
Other	0
Total	871,530

EXPENSES

Total	\$ 908,471
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.7
Registered Nurses	7.7
Licensed Practical Nurses	0.0
Home Health Aides	6.3
Physical Therapists	0.4
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.7
TOTAL FTEs	19.2

Bayfield County Health Department

117 East 5th Street, PO Box 403

Washburn WI 54891

Bayfield County

COUNTIES SERVED

Bayfield

(715) 373-6109

License Number: 11

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 110

TOTAL NUMBER OF ADMISSIONS 123**PERCENT ADMISSIONS FROM:**

Private Residences 23.6%

General Hospitals 60.2

Nursing Homes 14.6

Other 1.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 134

PERCENT DISCHARGES TO:

Private Residences 73.9%

General Hospitals 21.6

Nursing Homes 2.2

Deaths 0.0

Other 2.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	89	873	9.8
Home Health Aide	32	526	16.4
Physical Therapy	51	408	8.0
Spch/Occ/Resp Therapy	7	41	5.9
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,848	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 75.0%
4 to 24 0.0	Medicaid 7.3
25 to 54 11.8	Other Federal 2.4
55 to 64 10.0	State Funds 0.0
65 to 74 21.8	Private Insurance 9.7
75 to 84 35.5	Self Pay 5.6
85 & over 20.9	Other 0.0
	TOTAL PATIENTS 124

Males 53.6% Females 46.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.7%
Cancer 5.5	Genitourinary Sys. 5.5
Diabetes 5.5	Preg. & Childbirth 0.0
Diseases of Blood 3.6	Arthropathies 23.6
Dementia/Alzheimers 0.0	Osteopathies 1.8
Psychoses/Neuroses 0.9	Perinatal Period 0.0
Central Nervous Sys. 0.9	Ill-Defined Cond. 2.7
Paralysis/CP 0.0	Fractures 11.8
Cardiovascular 12.7	Wounds, Burns 3.6
Stroke 2.7	Compl. of Surgery 0.0
Respiratory 6.4	Other Conditions 10.0

REVENUE

Billings \$	181,945
Disallowances	31,992
Collections	149,953
Other	0
Total	149,953

EXPENSES

Total \$	273,321
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	4.7

Bellin Home Health Agency

744 South Webster, Box 23400
Green Bay WI 54305

Brown County

(920) 433-3480

License Number: 14

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 43

Number of unduplicated patients in 2000 = 823

COUNTIES SERVED

Brown

Door

Kewaunee

Manitowoc

Marinette

Oconto

Outagamie

Shawano

TOTAL NUMBER OF ADMISSIONS 796**PERCENT ADMISSIONS FROM:**

Private Residences 6.5%

General Hospitals 82.2

Nursing Homes 0.9

Other 10.4

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 810

PERCENT DISCHARGES TO:

Private Residences 73.2%

General Hospitals 15.4

Nursing Homes 0.9

Deaths 5.2

Other 5.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	732	7,262	9.9
Home Health Aide	154	4,878	31.7
Physical Therapy	135	1,317	9.8
Spch/Occ/Resp Therapy	32	218	6.8
Medical Social Service	83	228	2.7
Private Duty Nursing	4	116	29.0
Personal Care/PC RN Supv.	22	1,044	47.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	15,063	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.2%	Medicare 62.8%
4 to 24 3.6	Medicaid 4.6
25 to 54 17.4	Other Federal 0.4
55 to 64 10.8	State Funds 0.0
65 to 74 17.1	Private Insurance 29.4
75 to 84 32.9	Self Pay 2.8
85 & over 14.9	Other 0.0
	TOTAL PATIENTS 823

Males 44.2% Females 55.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.5%	Digestive Disorders 6.7%
Cancer 9.7	Genitourinary Sys. 3.2
Diabetes 3.5	Preg. & Childbirth 2.2
Diseases of Blood 0.9	Arthropathies 8.1
Dementia/Alzheimers 0.0	Osteopathies 1.6
Psychoses/Neuroses 0.5	Perinatal Period 0.9
Central Nervous Sys. 3.6	Ill-Defined Cond. 4.0
Paralysis/CP 1.0	Fractures 5.1
Cardiovascular 19.0	Wounds, Burns 3.0
Stroke 2.2	Compl. of Surgery 3.9
Respiratory 5.8	Other Conditions 13.7

REVENUE

Billings \$	1,247,371
Disallowances	170,945
Collections	1,076,426
Other	0
Total	1,076,426

EXPENSES

Total \$	1,616,274
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	3.4
Registered Nurses	8.6
Licensed Practical Nurses	0.8
Home Health Aides	10.4
Physical Therapists	2.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.8
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	6.1
TOTAL FTEs	33.1

Home Care Advantage, Inc.
120 South Webster Avenue
Green Bay WI 54301

Brown County

COUNTIES SERVED
Brown

(920) 437-0496

License Number: 154
Ownership of Agency: Proprietary Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 7
Number of unduplicated patients in 2000 = 54

TOTAL NUMBER OF ADMISSIONS 40

PERCENT ADMISSIONS FROM:

Private Residences	52.5%
General Hospitals	10.0
Nursing Homes	7.5
Other	30.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 55

PERCENT DISCHARGES TO:

Private Residences	60.0%
General Hospitals	30.9
Nursing Homes	1.8
Deaths	3.6
Other	3.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	52	1,904	36.6
Home Health Aide	10	173	17.3
Physical Therapy	5	28	5.6
Spch/Occ/Resp Therapy	4	2,847	711.8
Medical Social Service	0	0	0.0
Private Duty Nursing	24	1,178	49.1
Personal Care/PC RN Supv.	26	5,766	221.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,896	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 37.9%
4 to 24 7.4	Medicaid 10.3
25 to 54 11.1	Other Federal 0.0
55 to 64 7.4	State Funds 0.0
65 to 74 20.4	Private Insurance 3.4
75 to 84 29.6	Self Pay 48.3
85 & over 24.1	Other 0.0
	TOTAL PATIENTS 58

Males 63.0% Females 37.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 3.7%
Cancer 9.3	Genitourinary Sys. 5.6
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 3.7
Dementia/Alzheimers 3.7	Osteopathies 0.0
Psychoses/Neuroses 1.9	Perinatal Period 0.0
Central Nervous Sys. 5.6	Ill-Defined Cond. 5.6
Paralysis/CP 1.9	Fractures 13.0
Cardiovascular 16.7	Wounds, Burns 0.0
Stroke 5.6	Compl. of Surgery 0.0
Respiratory 1.9	Other Conditions 20.4

REVENUE

Billings \$	1,301,643
Disallowances	133,906
Collections	1,167,737
Other	77,576
Total	1,245,313

EXPENSES

Total \$	1,267,728
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	6.6
Licensed Practical Nurses	8.2
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.8
Homemakers	0.0
Other Staff	5.5
TOTAL FTEs	26.0

Interim Healthcare

2670 South Ashland Avenue, #203
Green Bay WI 54304

Brown County

(920) 494-9444

COUNTIES SERVED

Brown
Kewaunee
Oconto
Outagamie

License Number: 266

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 14

Number of unduplicated patients in 2000 = 69

TOTAL NUMBER OF ADMISSIONS 38

PERCENT ADMISSIONS FROM:

Private Residences	21.1%
General Hospitals	50.0
Nursing Homes	13.2
Other	15.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 47

PERCENT DISCHARGES TO:

Private Residences	34.0%
General Hospitals	17.0
Nursing Homes	12.8
Deaths	6.4
Other	29.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	67	2,884	43.0
Home Health Aide	25	7,039	281.6
Physical Therapy	17	159	9.4
Spch/Occ/Resp Therapy	7	24	3.4
Medical Social Service	0	0	0.0
Private Duty Nursing	3	2,852	950.7
Personal Care/PC RN Supv.	8	1,106	138.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,064	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.3%	Medicare 18.7%
4 to 24 2.9	Medicaid 45.3
25 to 54 27.5	Other Federal 0.0
55 to 64 8.7	State Funds 16.0
65 to 74 15.9	Private Insurance 17.3
75 to 84 21.7	Self Pay 2.7
85 & over 18.8	Other 0.0
	TOTAL PATIENTS 75

Males 50.7% Females 49.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 2.9	Genitourinary Sys. 1.4
Diabetes 11.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 7.2
Dementia/Alzheimers 1.4	Osteopathies 1.4
Psychoses/Neuroses 1.4	Perinatal Period 0.0
Central Nervous Sys. 7.2	Ill-Defined Cond. 7.2
Paralysis/CP 11.6	Fractures 10.1
Cardiovascular 11.6	Wounds, Burns 4.3
Stroke 4.3	Compl. of Surgery 1.4
Respiratory 2.9	Other Conditions 11.6

REVENUE

Billings \$	1,213,222
Disallowances	295,328
Collections	917,894
Other	30,362
Total	948,256

EXPENSES

Total \$	932,479
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	4.0
Registered Nurses	3.3
Licensed Practical Nurses	3.3
Home Health Aides	6.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.9
TOTAL FTEs	23.4

St. Vincent Hospital Home Health Care

1927 South Webster Avenue

Green Bay WI 54301

Brown County

(920) 448-7000

License Number: 35

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 127

Number of unduplicated patients in 2000 = 2,348

COUNTIES SERVED

Brown

Door

Kewaunee

Oconto

Oneida

Outagamie

Shawano

TOTAL NUMBER OF ADMISSIONS 2,556**PERCENT ADMISSIONS FROM:**

Private Residences 16.8%

General Hospitals 79.3

Nursing Homes 3.0

Other 0.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 2,454

PERCENT DISCHARGES TO:

Private Residences 86.3%

General Hospitals 4.3

Nursing Homes 3.1

Deaths 1.5

Other 4.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2,169	14,397	6.6
Home Health Aide	192	6,013	31.3
Physical Therapy	682	6,403	9.4
Spch/Occ/Resp Therapy	372	5,237	14.1
Medical Social Service	197	565	2.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	254	10,082	39.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	32	312	9.8
TOTAL	XXXXXXX	43,009	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 32.8%	Medicare 63.1%
4 to 24 5.8	Medicaid 14.8
25 to 54 10.6	Other Federal 0.2
55 to 64 6.0	State Funds 0.2
65 to 74 10.7	Private Insurance 19.2
75 to 84 18.7	Self Pay 1.6
85 & over 15.3	Other 1.0
	TOTAL PATIENTS 2,589

Males 44.8% Females 55.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 3.1%
Cancer 4.4	Genitourinary Sys. 0.0
Diabetes 2.9	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 6.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 30.1
Central Nervous Sys. 2.7	Ill-Defined Cond. 4.8
Paralysis/CP 0.6	Fractures 5.2
Cardiovascular 0.0	Wounds, Burns 10.6
Stroke 4.5	Compl. of Surgery 0.0
Respiratory 0.6	Other Conditions 22.7

REVENUE

Billings \$	3,749,965
Disallowances	463,172
Collections	3,286,793
Other	11,153
Total	3,297,946

EXPENSES

Total \$	3,831,671
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	20.4
Licensed Practical Nurses	1.4
Home Health Aides	10.9
Physical Therapists	5.5
Occupational Therapists	3.0
Speech Pathologists	2.5
Respiratory Therapists	0.0
Medical Social Workers	2.2
Other Therapeutic Staff	0.8
Personal Care Workers	4.1
Homemakers	0.1
Other Staff	10.0
TOTAL FTEs	62.9

Woodside Home Health Agency

1031 Anderson Drive, 307A

Green Bay WI 54304

Brown County

COUNTIES SERVED

Brown

Outagamie

(920) 499-0975

License Number: 311

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 39

Number of unduplicated patients in 2000 = 19

TOTAL NUMBER OF ADMISSIONS 19**PERCENT ADMISSIONS FROM:**

Private Residences	42.1%
General Hospitals	21.1
Nursing Homes	0.0
Other	36.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 17

PERCENT DISCHARGES TO:

Private Residences	41.2%
General Hospitals	23.5
Nursing Homes	5.9
Deaths	0.0
Other	29.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	19	3,557	187.2
Home Health Aide	17	4,668	274.6
Physical Therapy	3	30	10.0
Spch/Occ/Resp Therapy	3	28	9.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	10	1,180	118.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,463	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 42.9%
4 to 24 15.8	Medicaid 40.0
25 to 54 10.5	Other Federal 2.9
55 to 64 0.0	State Funds 2.9
65 to 74 5.3	Private Insurance 2.9
75 to 84 31.6	Self Pay 8.6
85 & over 36.8	Other 0.0
	TOTAL PATIENTS 35

Males 52.6% Females 47.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 5.3	Genitourinary Sys. 0.0
Diabetes 5.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 5.3
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 10.5
Paralysis/CP 0.0	Fractures 5.3
Cardiovascular 5.3	Wounds, Burns 5.3
Stroke 15.8	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 42.1

REVENUE

Billings \$	385,205
Disallowances	22,689
Collections	362,516
Other	336
Total	362,852

EXPENSES

Total \$	407,523
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.9
Licensed Practical Nurses	0.0
Home Health Aides	9.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.4
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	15.9

Burnett County DHHS

7410 County Road K, #280
Siren WI 54872

Burnett County

COUNTIES SERVED

Burnett

(715) 349-7600

License Number: 41

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 6

Number of unduplicated patients in 2000 = 73

TOTAL NUMBER OF ADMISSIONS 93

PERCENT ADMISSIONS FROM:

Private Residences	36.6%
General Hospitals	49.5
Nursing Homes	14.0
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 88

PERCENT DISCHARGES TO:

Private Residences	72.7%
General Hospitals	17.0
Nursing Homes	4.5
Deaths	1.1
Other	4.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	73	1,417	19.4
Home Health Aide	55	1,642	29.9
Physical Therapy	28	242	8.6
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,301	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 55.2%
4 to 24 2.7	Medicaid 7.3
25 to 54 20.5	Other Federal 7.3
55 to 64 17.8	State Funds 0.0
65 to 74 15.1	Private Insurance 15.6
75 to 84 26.0	Self Pay 14.6
85 & over 17.8	Other 0.0
	TOTAL PATIENTS 96

Males 45.2% Females 54.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 8.2%	Digestive Disorders 4.1%
Cancer 5.5	Genitourinary Sys. 2.7
Diabetes 4.1	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 11.0
Dementia/Alzheimers 5.5	Osteopathies 4.1
Psychoses/Neuroses 1.4	Perinatal Period 0.0
Central Nervous Sys. 6.8	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 11.0
Cardiovascular 11.0	Wounds, Burns 11.0
Stroke 5.5	Compl. of Surgery 1.4
Respiratory 6.8	Other Conditions 0.0

REVENUE

Billings \$	235,324
Disallowances	59,373
Collections	175,951
Other	3,243
Total	179,194

EXPENSES

Total \$	273,805
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STAFFING**FTEs**

Administrators	0.8
Reg. Nurse Supervisors	0.0
Registered Nurses	2.2
Licensed Practical Nurses	0.0
Home Health Aides	1.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	5.7

Calumet County Health Department/Home Health Agency

206 Court Street Courthouse

Chilton WI 53014

Calumet County

COUNTIES SERVED

Calumet

Fond du Lac

Manitowoc

(920) 849-1424

License Number: 42

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 24

Number of unduplicated patients in 2000 = 177

TOTAL NUMBER OF ADMISSIONS 175**PERCENT ADMISSIONS FROM:**

Private Residences 48.0%

General Hospitals 37.7

Nursing Homes 10.9

Other 3.4

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 183

PERCENT DISCHARGES TO:

Private Residences 49.2%

General Hospitals 27.3

Nursing Homes 10.9

Deaths 4.9

Other 7.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	165	2,398	14.5
Home Health Aide	96	3,753	39.1
Physical Therapy	36	228	6.3
Spch/Occ/Resp Therapy	15	99	6.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	46	1,526	33.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,004	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 53.2%
4 to 24 2.3	Medicaid 12.6
25 to 54 4.5	Other Federal 9.1
55 to 64 5.6	State Funds 0.0
65 to 74 18.6	Private Insurance 11.7
75 to 84 39.5	Self Pay 13.4
85 & over 28.8	Other 0.0
	TOTAL PATIENTS 231

Males 35.0% Females 65.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 1.7%
Cancer 6.2	Genitourinary Sys. 2.3
Diabetes 6.2	Preg. & Childbirth 0.0
Diseases of Blood 2.3	Arthropathies 14.1
Dementia/Alzheimers 0.0	Osteopathies 0.6
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 0.6	Ill-Defined Cond. 6.8
Paralysis/CP 0.6	Fractures 4.0
Cardiovascular 26.0	Wounds, Burns 5.6
Stroke 4.5	Compl. of Surgery 0.6
Respiratory 6.8	Other Conditions 10.7

REVENUE

Billings \$	496,350
Disallowances	88,521
Collections	407,829
Other	53,546
Total	461,375

EXPENSES

Total \$	514,162
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	1.0
Registered Nurses	3.5
Licensed Practical Nurses	0.0
Home Health Aides	2.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	9.5

Calumet Medical Center Health Care Service

614 Memorial Drive

Chilton WI 53014

Calumet County

(920) 849-7505

COUNTIES SERVED

Calumet

Fond du Lac

Manitowoc

Sheboygan

License Number: 174

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 11

Number of unduplicated patients in 2000 = 308

TOTAL NUMBER OF ADMISSIONS 239**PERCENT ADMISSIONS FROM:**

Private Residences 56.5%

General Hospitals 39.7

Nursing Homes 2.5

Other 1.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 192

PERCENT DISCHARGES TO:

Private Residences 68.8%

General Hospitals 7.8

Nursing Homes 4.2

Deaths 14.1

Other 5.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	173	2,125	12.3
Home Health Aide	70	1,602	22.9
Physical Therapy	37	275	7.4
Spch/Occ/Resp Therapy	32	155	4.8
Medical Social Service	12	27	2.3
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	62	1,785	28.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	51	3,379	66.3
TOTAL	XXXXXXX	9,348	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.3%	Medicare 56.2%
4 to 24 1.0	Medicaid 6.2
25 to 54 10.4	Other Federal 0.0
55 to 64 6.8	State Funds 10.1
65 to 74 18.8	Private Insurance 13.0
75 to 84 33.4	Self Pay 14.6
85 & over 29.2	Other 0.0
	TOTAL PATIENTS 308

Males 51.3% Females 48.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 0.3%
Cancer 5.8	Genitourinary Sys. 1.6
Diabetes 1.9	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 6.2
Dementia/Alzheimers 1.6	Osteopathies 1.9
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.3	Ill-Defined Cond. 12.3
Paralysis/CP 0.3	Fractures 3.6
Cardiovascular 14.3	Wounds, Burns 5.5
Stroke 1.9	Compl. of Surgery 1.0
Respiratory 9.4	Other Conditions 28.9

REVENUE

Billings \$	336,047
Disallowances	77,496
Collections	258,551
Other	0
Total	258,551

EXPENSES

Total \$	270,361
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	1.9
Licensed Practical Nurses	0.0
Home Health Aides	1.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.2
Homemakers	2.0
Other Staff	1.8
TOTAL FTEs	9.1

Chippewa County Department/Public Health
 711 North Bridge Street, Room 222
 Chippewa Falls WI 54729 Chippewa County

COUNTIES SERVED
 Chippewa

(715) 726-7900

License Number: 43
 Ownership of Agency: County
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 52
 Number of unduplicated patients in 2000 = 367

TOTAL NUMBER OF ADMISSIONS 240

PERCENT ADMISSIONS FROM:

Private Residences	65.4%
General Hospitals	20.4
Nursing Homes	13.3
Other	0.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 271

PERCENT DISCHARGES TO:

Private Residences	67.9%
General Hospitals	5.9
Nursing Homes	19.6
Deaths	5.9
Other	0.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	294	3,530	12.0
Home Health Aide	164	6,312	38.5
Physical Therapy	49	294	6.0
Spch/Occ/Resp Therapy	19	69	3.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	176	5,449	31.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	15,654	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.1%	Medicare 44.5%
4 to 24 1.4	Medicaid 38.0
25 to 54 9.3	Other Federal 1.4
55 to 64 6.0	State Funds 0.0
65 to 74 19.9	Private Insurance 6.8
75 to 84 30.5	Self Pay 9.1
85 & over 31.9	Other 0.2
	TOTAL PATIENTS 440

Males 61.3% Females 38.7 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	2.5%
Cancer	0.0	Genitourinary Sys.	2.2
Diabetes	0.0	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	23.7
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.3	Perinatal Period	0.0
Central Nervous Sys.	0.0	Ill-Defined Cond.	20.7
Paralysis/CP	0.0	Fractures	0.0
Cardiovascular	14.4	Wounds, Burns	13.9
Stroke	0.0	Compl. of Surgery	0.0
Respiratory	8.7	Other Conditions	13.6

REVENUE

Billings	\$	994,209
Disallowances		158,254
Collections		835,955
Other		0
Total		835,955

EXPENSES

Total	\$	876,175
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.1
Licensed Practical Nurses	0.0
Home Health Aides	5.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	2.5
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	21.3

St. Joseph's Hospital Home Health Agency

2661 County Highway I

Chippewa Falls WI 54729

Chippewa County

(715) 726-3485

License Number: 158

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 30

Number of unduplicated patients in 2000 = 586

COUNTIES SERVED

Buffalo

Chippewa

Dunn

Eau Claire

Pepin

Rusk

Trempealeau

TOTAL NUMBER OF ADMISSIONS 742**PERCENT ADMISSIONS FROM:**

Private Residences 36.5%

General Hospitals 48.2

Nursing Homes 9.3

Other 5.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 793

PERCENT DISCHARGES TO:

Private Residences 59.5%

General Hospitals 24.6

Nursing Homes 1.6

Deaths 1.0

Other 13.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	528	8,043	15.2
Home Health Aide	192	6,869	35.8
Physical Therapy	236	2,707	11.5
Spch/Occ/Resp Therapy	102	1,160	11.4
Medical Social Service	79	320	4.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	19,099	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 72.5%
4 to 24 2.2	Medicaid 15.2
25 to 54 10.6	Other Federal 0.3
55 to 64 10.4	State Funds 0.2
65 to 74 20.3	Private Insurance 9.9
75 to 84 36.0	Self Pay 0.9
85 & over 19.6	Other 1.0
	TOTAL PATIENTS 586

Males 39.4% Females 60.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.9%	Digestive Disorders 5.6%
Cancer 11.8	Genitourinary Sys. 3.8
Diabetes 2.9	Preg. & Childbirth 0.3
Diseases of Blood 0.5	Arthropathies 10.4
Dementia/Alzheimers 0.3	Osteopathies 0.9
Psychoses/Neuroses 0.2	Perinatal Period 0.0
Central Nervous Sys. 1.5	Ill-Defined Cond. 3.8
Paralysis/CP 1.2	Fractures 9.2
Cardiovascular 17.1	Wounds, Burns 3.6
Stroke 4.1	Compl. of Surgery 3.2
Respiratory 10.1	Other Conditions 8.7

REVENUE

Billings \$	1,986,515
Disallowances	323,264
Collections	1,663,251
Other	50
Total	1,663,301

EXPENSES

Total \$	2,059,875
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	1.0
Registered Nurses	12.1
Licensed Practical Nurses	0.0
Home Health Aides	7.3
Physical Therapists	2.0
Occupational Therapists	0.4
Speech Pathologists	0.2
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	1.4
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	28.9

Clark County Home Care Agency

517 Court Street, Room 105

Neillsville WI 54456

Clark County

COUNTIES SERVED

Clark

(715) 743-5105

License Number: 44

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 114

TOTAL NUMBER OF ADMISSIONS 112**PERCENT ADMISSIONS FROM:**

Private Residences 0.9%

General Hospitals 50.9

Nursing Homes 10.7

Other 37.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	96	1,466	15.3
Home Health Aide	54	1,664	30.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	18	117	6.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,247	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 107

PERCENT DISCHARGES TO:

Private Residences 70.1%

General Hospitals 25.2

Nursing Homes 3.7

Deaths 0.9

Other 0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 79.3%
4 to 24 0.9	Medicaid 18.1
25 to 54 1.8	Other Federal 0.0
55 to 64 6.1	State Funds 0.0
65 to 74 22.8	Private Insurance 2.6
75 to 84 38.6	Self Pay 0.0
85 & over 29.8	Other 0.0
	TOTAL PATIENTS 116

Males 32.5% Females 67.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.6%
Cancer 2.6	Genitourinary Sys. 7.0
Diabetes 11.4	Preg. & Childbirth 0.0
Diseases of Blood 3.5	Arthropathies 9.6
Dementia/Alzheimers 1.8	Osteopathies 0.9
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.8	Ill-Defined Cond. 2.6
Paralysis/CP 0.9	Fractures 6.1
Cardiovascular 21.9	Wounds, Burns 7.9
Stroke 1.8	Compl. of Surgery 1.8
Respiratory 10.5	Other Conditions 5.3

REVENUE

Billings \$	249,837
Disallowances	54,087
Collections	195,750
Other	0
Total	195,750

EXPENSES

Total \$	271,665
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.2
Registered Nurses	2.3
Licensed Practical Nurses	0.0
Home Health Aides	1.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.1
TOTAL FTEs	6.4

Memorial Hospital, Inc.216 Sunset Place
Neillsville WI 54456

Clark County

(715) 743-3101

COUNTIES SERVEDClark
Eau Claire
Jackson

License Number: 146

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 6

Number of unduplicated patients in 2000 = 33

TOTAL NUMBER OF ADMISSIONS 27**PERCENT ADMISSIONS FROM:**

Private Residences	11.1%
General Hospitals	70.4
Nursing Homes	18.5
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 25

PERCENT DISCHARGES TO:

Private Residences	56.0%
General Hospitals	8.0
Nursing Homes	24.0
Deaths	12.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	33	582	17.6
Home Health Aide	12	750	62.5
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,332	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 90.9%
4 to 24 0.0	Medicaid 0.0
25 to 54 3.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 21.2	Private Insurance 6.1
75 to 84 18.2	Self Pay 3.0
85 & over 57.6	Other 0.0
	TOTAL PATIENTS 33

Males 30.3% Females 69.7 %

PRIMARY DIAGNOSIS

Infectious Disorders	9.1%	Digestive Disorders	0.0%
Cancer	3.0	Genitourinary Sys.	6.1
Diabetes	12.1	Preg. & Childbirth	0.0
Diseases of Blood	9.1	Arthropathies	3.0
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.0	Perinatal Period	0.0
Central Nervous Sys.	0.0	Ill-Defined Cond.	0.0
Paralysis/CP	0.0	Fractures	6.1
Cardiovascular	21.2	Wounds, Burns	3.0
Stroke	6.1	Compl. of Surgery	0.0
Respiratory	21.2	Other Conditions	0.0

REVENUE

Billings	\$	102,017
Disallowances		9,481
Collections		92,536
Other		0
Total		92,536

EXPENSES

Total	\$	131,823
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.7
Licensed Practical Nurses	0.5
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTEs	3.3

Divine Savior Home Care

128 Eastridge Drive, Suite 100

Portage WI 53901

Columbia County

(608) 745-6400

COUNTIES SERVED

Adams

Columbia

Green Lake

Marquette

Sauk

License Number: 328

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 21

Number of unduplicated patients in 2000 = 283

TOTAL NUMBER OF ADMISSIONS 329**PERCENT ADMISSIONS FROM:**

Private Residences 21.0%

General Hospitals 63.5

Nursing Homes 11.6

Other 4.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 324

PERCENT DISCHARGES TO:

Private Residences 74.4%

General Hospitals 17.9

Nursing Homes 2.2

Deaths 2.2

Other 3.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	281	2,186	7.8
Home Health Aide	77	752	9.8
Physical Therapy	165	753	4.6
Spch/Occ/Resp Therapy	70	229	3.3
Medical Social Service	7	7	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,927	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.4%	Medicare 81.4%
4 to 24 1.4	Medicaid 2.7
25 to 54 9.2	Other Federal 0.0
55 to 64 5.3	State Funds 0.0
65 to 74 24.0	Private Insurance 10.1
75 to 84 34.3	Self Pay 5.1
85 & over 25.4	Other 0.8
	TOTAL PATIENTS 376

Males 35.3% Females 64.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 1.4%
Cancer 4.9	Genitourinary Sys. 3.2
Diabetes 4.2	Preg. & Childbirth 0.7
Diseases of Blood 1.1	Arthropathies 15.2
Dementia/Alzheimers 0.0	Osteopathies 2.1
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.4	Ill-Defined Cond. 2.1
Paralysis/CP 0.7	Fractures 13.1
Cardiovascular 21.2	Wounds, Burns 2.8
Stroke 3.9	Compl. of Surgery 0.0
Respiratory 8.5	Other Conditions 12.7

REVENUE

Billings \$	471,443
Disallowances	0
Collections	471,443
Other	0
Total	471,443

EXPENSES

Total \$	363,560
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.8
Licensed Practical Nurses	1.0
Home Health Aides	1.3
Physical Therapists	1.0
Occupational Therapists	0.4
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	9.4

Prairie du Chien Memorial Hospital Home Health
 705 East Taylor Street
 Prairie du Chien WI 53821 Crawford County

COUNTIES SERVED
 Crawford
 Grant

(608) 357-2262

License Number: 46
 Ownership of Agency: Nonprofit Corporation
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 26
 Number of unduplicated patients in 2000 = 291

TOTAL NUMBER OF ADMISSIONS 350

PERCENT ADMISSIONS FROM:

Private Residences	2.0%
General Hospitals	78.3
Nursing Homes	2.6
Other	17.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	291	5,662	19.5
Home Health Aide	93	2,040	21.9
Physical Therapy	63	325	5.2
Spch/Occ/Resp Therapy	26	254	9.8
Medical Social Service	18	37	2.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,318	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 348

PERCENT DISCHARGES TO:

Private Residences	64.9%
General Hospitals	27.6
Nursing Homes	1.7
Deaths	1.7
Other	4.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.5%	Medicare 80.4%
4 to 24 0.7	Medicaid 7.1
25 to 54 8.6	Other Federal 0.0
55 to 64 6.2	State Funds 0.0
65 to 74 22.3	Private Insurance 11.5
75 to 84 34.7	Self Pay 0.7
85 & over 23.0	Other 0.3
	TOTAL PATIENTS 296

Males 44.3% Females 55.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.4%
Cancer 9.6	Genitourinary Sys. 2.7
Diabetes 3.1	Preg. & Childbirth 0.0
Diseases of Blood 1.4	Arthropathies 9.3
Dementia/Alzheimers 0.3	Osteopathies 2.7
Psychoses/Neuroses 0.0	Perinatal Period 3.4
Central Nervous Sys. 1.4	Ill-Defined Cond. 4.1
Paralysis/CP 0.3	Fractures 6.9
Cardiovascular 23.0	Wounds, Burns 2.4
Stroke 4.8	Compl. of Surgery 1.4
Respiratory 12.4	Other Conditions 8.2

REVENUE

Billings	\$ 1,093,521
Disallowances	331,733
Collections	761,788
Other	0
Total	761,788

EXPENSES

Total	\$ 950,325
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STAFFING

FTEs

Administrators	0.1
Reg. Nurse Supervisors	1.5
Registered Nurses	6.8
Licensed Practical Nurses	0.0
Home Health Aides	2.8
Physical Therapists	0.1
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.4
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.5
TOTAL FTEs	15.1

Catalyst, Inc.

222 North Midvale Boulevard, Suite 3
Madison WI 53705 Dane County

COUNTIES SERVED

Dane

(608) 238-8119

License Number: 316

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 21

Number of unduplicated patients in 2000 = 26

TOTAL NUMBER OF ADMISSIONS 5

PERCENT ADMISSIONS FROM:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	0	0	0.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	2	312	156.0
Personal Care/PC RN Supv.	48	4,220	87.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,532	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 3

PERCENT DISCHARGES TO:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.8%	Medicare 0.0%
4 to 24 96.2	Medicaid 100.0
25 to 54 0.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 0.0	Private Insurance 0.0
75 to 84 0.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 26

Males 50.0% Females 50.0 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	0.0%
Cancer	0.0	Genitourinary Sys.	0.0
Diabetes	0.0	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	0.0
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	26.9	Perinatal Period	3.8
Central Nervous Sys.	7.7	Ill-Defined Cond.	7.7
Paralysis/CP	19.2	Fractures	0.0
Cardiovascular	0.0	Wounds, Burns	0.0
Stroke	0.0	Compl. of Surgery	0.0
Respiratory	3.8	Other Conditions	30.8

REVENUE

Billings	\$	510,289
Disallowances		108,654
Collections		401,635
Other		918
Total		402,553

EXPENSES

Total	\$	402,571
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.1
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	20.2
Homemakers	0.0
Other Staff	0.3
TOTAL FTEs	21.7

Home Health United-VNS

4801 Hayes Road
Madison WI 53704

Dane County

(608) 242-1516

License Number: 176

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 219

Number of unduplicated patients in 2000 = 3,659

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	3,659	54,709	15.0
Home Health Aide	1,069	30,275	28.3
Physical Therapy	1,602	15,053	9.4
Spch/Occ/Resp Therapy	735	5,495	7.5
Medical Social Service	881	2,347	2.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	14	836	59.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	108,715	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.1%	Medicare 77.4%
4 to 24 2.2	Medicaid 3.8
25 to 54 11.3	Other Federal 0.0
55 to 64 9.2	State Funds 0.0
65 to 74 20.4	Private Insurance 18.0
75 to 84 33.8	Self Pay 0.8
85 & over 22.0	Other 0.0
	TOTAL PATIENTS 3,731

Males 37.4% Females 62.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.4%	Digestive Disorders 1.9%
Cancer 8.6	Genitourinary Sys. 2.8
Diabetes 2.8	Preg. & Childbirth 0.1
Diseases of Blood 1.3	Arthropathies 20.9
Dementia/Alzheimers 0.2	Osteopathies 1.1
Psychoses/Neuroses 0.6	Perinatal Period 0.2
Central Nervous Sys. 2.8	Ill-Defined Cond. 5.3
Paralysis/CP 0.4	Fractures 7.5
Cardiovascular 16.8	Wounds, Burns 5.1
Stroke 1.4	Compl. of Surgery 0.8
Respiratory 7.2	Other Conditions 10.5

COUNTIES SERVED

Adams
Columbia
Dane
Dodge
Grant
Green
Green Lake
Iowa
Jefferson
Juneau
Marquette
Monroe
Richland
Rock
Sauk
Vernon
Walworth

TOTAL NUMBER OF ADMISSIONS 3,580

PERCENT ADMISSIONS FROM:

Private Residences	0.3%
General Hospitals	86.9
Nursing Homes	9.7
Other	3.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 3,756

PERCENT DISCHARGES TO:

Private Residences	76.2%
General Hospitals	6.5
Nursing Homes	5.3
Deaths	4.6
Other	7.3

STAFFING**FTEs**

Administrators	8.8
Reg. Nurse Supervisors	8.0
Registered Nurses	74.5
Licensed Practical Nurses	5.6
Home Health Aides	38.2
Physical Therapists	9.5
Occupational Therapists	4.5
Speech Pathologists	0.4
Respiratory Therapists	4.0
Medical Social Workers	7.2
Other Therapeutic Staff	1.4
Personal Care Workers	3.3
Homemakers	5.7
Other Staff	41.7
TOTAL FTEs	212.8

REVENUE

Billings	\$ 11,722,785
Disallowances	1,947,488
Collections	9,775,297
Other	405,180
Total	10,180,477

EXPENSES

Total	\$ 10,042,584
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Independent Health Care, Inc.

437 South Yellowstone Drive, #208

Madison WI 53719

Dane County

COUNTIES SERVED

Dane

(608) 274-2097

License Number: 294

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 15

Number of unduplicated patients in 2000 = 135

TOTAL NUMBER OF ADMISSIONS 141**PERCENT ADMISSIONS FROM:**

Private Residences 34.0%

General Hospitals 27.7

Nursing Homes 38.3

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 141

PERCENT DISCHARGES TO:

Private Residences 62.4%

General Hospitals 16.3

Nursing Homes 7.1

Deaths 0.0

Other 14.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	129	2,556	19.8
Home Health Aide	76	1,800	23.7
Physical Therapy	92	956	10.4
Spch/Occ/Resp Therapy	46	364	7.9
Medical Social Service	14	21	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,697	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 94.9%
4 to 24 0.0	Medicaid 0.0
25 to 54 3.7	Other Federal 0.0
55 to 64 2.2	State Funds 0.7
65 to 74 18.5	Private Insurance 2.2
75 to 84 39.3	Self Pay 2.2
85 & over 36.3	Other 0.0
	TOTAL PATIENTS 138

Males 31.9% Females 68.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 3.7%
Cancer 0.7	Genitourinary Sys. 1.5
Diabetes 5.9	Preg. & Childbirth 0.0
Diseases of Blood 2.2	Arthropathies 11.1
Dementia/Alzheimers 0.0	Osteopathies 0.7
Psychoses/Neuroses 3.0	Perinatal Period 0.0
Central Nervous Sys. 2.2	Ill-Defined Cond. 20.0
Paralysis/CP 0.7	Fractures 6.7
Cardiovascular 11.9	Wounds, Burns 10.4
Stroke 1.5	Compl. of Surgery 0.7
Respiratory 8.9	Other Conditions 7.4

REVENUE

Billings \$	494,348
Disallowances	6,200
Collections	488,148
Other	1,351
Total	489,499

EXPENSES

Total \$	509,211
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STAFFING**FTEs**

Administrators	1.2
Reg. Nurse Supervisors	0.0
Registered Nurses	2.4
Licensed Practical Nurses	0.0
Home Health Aides	1.3
Physical Therapists	0.4
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.6
TOTAL FTEs	7.0

Interim Healthcare of Madison

702 North Blackhawk Avenue, #200

Madison WI 53705

Dane County

COUNTIES SERVED

Dane

(608) 238-0268

License Number: 206

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 34

Number of unduplicated patients in 2000 = 81

TOTAL NUMBER OF ADMISSIONS 91**PERCENT ADMISSIONS FROM:**

Private Residences	34.1%
General Hospitals	46.2
Nursing Homes	17.6
Other	2.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 90

PERCENT DISCHARGES TO:

Private Residences	86.7%
General Hospitals	2.2
Nursing Homes	2.2
Deaths	7.8
Other	1.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	81	6,019	74.3
Home Health Aide	81	4,499	55.5
Physical Therapy	9	240	26.7
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	1	332	332.0
Personal Care/PC RN Supv.	76	4,198	55.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	85	8,853	104.2
TOTAL	XXXXXXX	24,141	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.7%	Medicare 13.8%
4 to 24 13.6	Medicaid 17.5
25 to 54 18.5	Other Federal 0.7
55 to 64 16.0	State Funds 7.4
65 to 74 13.6	Private Insurance 4.8
75 to 84 21.0	Self Pay 55.8
85 & over 13.6	Other 0.0
	TOTAL PATIENTS 269

Males 25.9% Females 74.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 1.2	Genitourinary Sys. 0.0
Diabetes 9.9	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 1.2
Dementia/Alzheimers 1.2	Osteopathies 0.0
Psychoses/Neuroses 2.5	Perinatal Period 0.0
Central Nervous Sys. 3.7	Ill-Defined Cond. 1.2
Paralysis/CP 12.3	Fractures 7.4
Cardiovascular 13.6	Wounds, Burns 24.7
Stroke 1.2	Compl. of Surgery 0.0
Respiratory 9.9	Other Conditions 9.9

REVENUE

Billings	\$ 2,198,948
Disallowances	314,194
Collections	1,884,754
Other	0
Total	1,884,754

EXPENSES

Total	\$ 1,817,412
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	12.3
Licensed Practical Nurses	2.4
Home Health Aides	14.3
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	4.4
Other Staff	6.6
TOTAL FTEs	42.1

Meriter Home Care Agency
309 West Washington Avenue
Madison WI 53703

Dane County

(608) 284-3300

License Number: 222
Ownership of Agency: Proprietary Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? Yes
Number of patients visited on 12/7/2000 = 53
Number of unduplicated patients in 2000 = 1,241

COUNTIES SERVED

Columbia
Dane
Dodge
Green
Iowa
Jefferson
LaFayette
Milwaukee
Rock
Sauk

TOTAL NUMBER OF ADMISSIONS 1,269

PERCENT ADMISSIONS FROM:

Private Residences 1.1%
General Hospitals 63.4
Nursing Homes 13.9
Other 21.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	949	9,777	10.3
Home Health Aide	281	5,105	18.2
Physical Therapy	727	4,917	6.8
Spch/Occ/Resp Therapy	253	1,337	5.3
Medical Social Service	193	293	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	21,429	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,259

PERCENT DISCHARGES TO:

Private Residences 87.2%
General Hospitals 5.3
Nursing Homes 2.8
Deaths 2.0
Other 2.7

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.0%	Medicare 53.3%
4 to 24 2.2	Medicaid 3.4
25 to 54 16.2	Other Federal 0.8
55 to 64 11.3	State Funds 0.0
65 to 74 18.5	Private Insurance 38.2
75 to 84 31.6	Self Pay 1.4
85 & over 19.3	Other 2.9
	TOTAL PATIENTS 2,916

Males 37.7% Females 62.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.5%	Digestive Disorders 1.5%
Cancer 6.2	Genitourinary Sys. 3.1
Diabetes 1.7	Preg. & Childbirth 0.7
Diseases of Blood 1.0	Arthropathies 19.1
Dementia/Alzheimers 0.4	Osteopathies 1.5
Psychoses/Neuroses 0.6	Perinatal Period 0.2
Central Nervous Sys. 1.7	Ill-Defined Cond. 16.7
Paralysis/CP 0.5	Fractures 5.6
Cardiovascular 11.4	Wounds, Burns 1.8
Stroke 2.7	Compl. of Surgery 1.6
Respiratory 8.1	Other Conditions 12.5

REVENUE

Billings \$ 2,148,187
Disallowances 121,579
Collections 2,026,608
Other 1,045
Total 2,027,653

EXPENSES

Total \$ 1,845,445

STAFFING

FTEs

Administrators 0.4
Reg. Nurse Supervisors 1.0
Registered Nurses 12.6
Licensed Practical Nurses 1.0
Home Health Aides 4.4
Physical Therapists 5.2
Occupational Therapists 1.4
Speech Pathologists 0.0
Respiratory Therapists 0.0
Medical Social Workers 0.7
Other Therapeutic Staff 0.0
Personal Care Workers 0.0
Homemakers 0.0
Other Staff 4.0
TOTAL FTEs 30.7

University Hospital Home Health Agency

3330 University Avenue, Suite 300

Madison WI 53705

Dane County

(608) 262-8116

License Number: 252

Ownership of Agency: State

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 44

Number of unduplicated patients in 2000 = 1,086

COUNTIES SERVED

Columbia

Dane

Dodge

Green

Iowa

Jefferson

Rock

Sauk

TOTAL NUMBER OF ADMISSIONS 1,128**PERCENT ADMISSIONS FROM:**

Private Residences 31.8%

General Hospitals 57.4

Nursing Homes 5.5

Other 5.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,137

PERCENT DISCHARGES TO:

Private Residences 81.9%

General Hospitals 7.4

Nursing Homes 1.5

Deaths 1.6

Other 7.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	983	12,168	12.4
Home Health Aide	125	1,702	13.6
Physical Therapy	446	2,797	6.3
Spch/Occ/Resp Therapy	70	284	4.1
Medical Social Service	1	2	2.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	2	8	4.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	16,961	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.4%	Medicare 52.4%
4 to 24 3.9	Medicaid 6.5
25 to 54 29.2	Other Federal 0.0
55 to 64 16.0	State Funds 0.2
65 to 74 18.2	Private Insurance 34.6
75 to 84 20.5	Self Pay 1.6
85 & over 9.8	Other 4.7
	TOTAL PATIENTS 1,086

Males 37.2% Females 62.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.3%	Digestive Disorders 2.0%
Cancer 17.6	Genitourinary Sys. 4.4
Diabetes 3.6	Preg. & Childbirth 0.7
Diseases of Blood 0.7	Arthropathies 12.0
Dementia/Alzheimers 0.1	Osteopathies 2.0
Psychoses/Neuroses 0.9	Perinatal Period 0.8
Central Nervous Sys. 3.0	Ill-Defined Cond. 6.0
Paralysis/CP 0.8	Fractures 5.4
Cardiovascular 9.5	Wounds, Burns 4.0
Stroke 1.1	Compl. of Surgery 3.0
Respiratory 5.2	Other Conditions 15.7

REVENUE

Billings \$	1,690,364
Disallowances	413,000
Collections	1,277,364
Other	0
Total	1,277,364

EXPENSES

Total \$	1,721,090
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	1.0
Registered Nurses	13.0
Licensed Practical Nurses	2.5
Home Health Aides	1.0
Physical Therapists	4.0
Occupational Therapists	0.5
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.8
TOTAL FTEs	26.1

Stoughton Hospital Home Health United

900 Ridge Street
Stoughton WI 53589

Dane County

COUNTIES SERVED

Dane
Rock

(608) 242-1516

License Number: 341

Ownership of Agency: Nonprofit Association

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 26

Number of unduplicated patients in 2000 = 362

TOTAL NUMBER OF ADMISSIONS 374**PERCENT ADMISSIONS FROM:**

Private Residences	1.3%
General Hospitals	80.5
Nursing Homes	13.9
Other	4.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 345

PERCENT DISCHARGES TO:

Private Residences	73.6%
General Hospitals	4.9
Nursing Homes	8.4
Deaths	2.6
Other	10.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	362	3,959	10.9
Home Health Aide	114	2,206	19.4
Physical Therapy	224	1,940	8.7
Spch/Occ/Resp Therapy	53	361	6.8
Medical Social Service	98	185	1.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,651	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 82.0%
4 to 24 2.2	Medicaid 1.6
25 to 54 6.9	Other Federal 0.0
55 to 64 9.1	State Funds 0.0
65 to 74 20.7	Private Insurance 14.8
75 to 84 29.8	Self Pay 1.6
85 & over 31.2	Other 0.0
	TOTAL PATIENTS 366

Males 35.9% Females 64.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 5.8%
Cancer 4.4	Genitourinary Sys. 2.8
Diabetes 2.8	Preg. & Childbirth 0.0
Diseases of Blood 1.1	Arthropathies 21.5
Dementia/Alzheimers 0.3	Osteopathies 1.9
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 2.2	Ill-Defined Cond. 7.5
Paralysis/CP 0.3	Fractures 9.7
Cardiovascular 17.7	Wounds, Burns 4.7
Stroke 5.2	Compl. of Surgery 0.6
Respiratory 6.4	Other Conditions 4.7

REVENUE

Billings \$	831,428
Disallowances	176,925
Collections	654,503
Other	0
Total	654,503

EXPENSES

Total \$	707,045
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	5.0
Licensed Practical Nurses	0.3
Home Health Aides	2.0
Physical Therapists	1.9
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.7
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	12.8

Hillside Home Health

709 South University Avenue
Beaver Dam WI 53916

Dodge County

(920) 887-4050

COUNTIES SERVED

Columbia
Dane
Dodge
Fond du Lac
Green Lake

License Number: 188

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 20

Number of unduplicated patients in 2000 = 630

TOTAL NUMBER OF ADMISSIONS 700

PERCENT ADMISSIONS FROM:

Private Residences	35.1%
General Hospitals	57.7
Nursing Homes	6.7
Other	0.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	611	6,506	10.6
Home Health Aide	223	3,086	13.8
Physical Therapy	133	618	4.6
Spch/Occ/Resp Therapy	38	131	3.4
Medical Social Service	20	30	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,371	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 715

PERCENT DISCHARGES TO:

Private Residences	73.1%
General Hospitals	14.8
Nursing Homes	3.6
Deaths	2.1
Other	6.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.8%	Medicare 80.2%
4 to 24 0.6	Medicaid 2.1
25 to 54 6.3	Other Federal 0.2
55 to 64 5.2	State Funds 0.0
65 to 74 20.8	Private Insurance 17.1
75 to 84 36.2	Self Pay 0.5
85 & over 26.0	Other 0.0
	TOTAL PATIENTS 631

Males 44.8% Females 55.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.8%	Digestive Disorders 0.6%
Cancer 10.8	Genitourinary Sys. 2.9
Diabetes 4.3	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 12.2
Dementia/Alzheimers 0.3	Osteopathies 1.4
Psychoses/Neuroses 0.0	Perinatal Period 4.3
Central Nervous Sys. 2.7	Ill-Defined Cond. 3.2
Paralysis/CP 0.0	Fractures 8.7
Cardiovascular 21.9	Wounds, Burns 6.8
Stroke 2.9	Compl. of Surgery 2.2
Respiratory 11.6	Other Conditions 1.4

REVENUE

Billings	\$ 1,023,559
Disallowances	100,773
Collections	922,786
Other	0
Total	922,786

EXPENSES

Total	\$ 1,050,921
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.9
Registered Nurses	9.4
Licensed Practical Nurses	0.0
Home Health Aides	2.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.4
TOTAL FTEs	19.1

Marquardt Memorial Manor, Inc.1020 Hill Street
Watertown WI 53098

Dodge County

COUNTIES SERVEDDane
Dodge
Jefferson

(920) 261-7108

License Number: 134

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 17

Number of unduplicated patients in 2000 = 100

TOTAL NUMBER OF ADMISSIONS 115**PERCENT ADMISSIONS FROM:**

Private Residences	18.3%
General Hospitals	28.7
Nursing Homes	5.2
Other	47.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 90

PERCENT DISCHARGES TO:

Private Residences	54.4%
General Hospitals	22.2
Nursing Homes	11.1
Deaths	2.2
Other	10.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	100	1,839	18.4
Home Health Aide	86	2,396	27.9
Physical Therapy	39	317	8.1
Spch/Occ/Resp Therapy	22	194	8.8
Medical Social Service	25	188	7.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	148	3,122	21.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,056	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 50.5%
4 to 24 0.0	Medicaid 1.8
25 to 54 2.0	Other Federal 0.0
55 to 64 2.0	State Funds 0.0
65 to 74 7.0	Private Insurance 2.3
75 to 84 43.0	Self Pay 43.2
85 & over 46.0	Other 2.3
	TOTAL PATIENTS 220

Males 44.0% Females 56.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 11.0%	Digestive Disorders 2.0%
Cancer 6.0	Genitourinary Sys. 5.0
Diabetes 3.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 7.0
Dementia/Alzheimers 7.0	Osteopathies 6.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 4.0	Fractures 6.0
Cardiovascular 25.0	Wounds, Burns 9.0
Stroke 4.0	Compl. of Surgery 1.0
Respiratory 3.0	Other Conditions 1.0

REVENUE

Billings \$	500,640
Disallowances	164,579
Collections	336,061
Other	0
Total	336,061

EXPENSES

Total \$	402,692
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.6
Registered Nurses	1.8
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	6.5

Watertown Memorial Hospital-Home Health Program

125 Hospital Drive

Watertown WI 53098

Dodge County

(920) 262-4262

COUNTIES SERVED

Dodge

Jefferson

Washington

Waukesha

License Number: 165

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 28

Number of unduplicated patients in 2000 = 283

TOTAL NUMBER OF ADMISSIONS 281**PERCENT ADMISSIONS FROM:**

Private Residences 46.6%

General Hospitals 46.3

Nursing Homes 3.6

Other 3.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 285

PERCENT DISCHARGES TO:

Private Residences 76.8%

General Hospitals 16.1

Nursing Homes 2.1

Deaths 1.1

Other 3.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	186	3,502	18.8
Home Health Aide	33	1,454	44.1
Physical Therapy	74	1,593	21.5
Spch/Occ/Resp Therapy	14	113	8.1
Medical Social Service	2	4	2.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	114	4,906	43.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	21	1,128	53.7
TOTAL	XXXXXXX	12,700	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 6.7%	Medicare 68.6%
4 to 24 1.4	Medicaid 8.3
25 to 54 15.2	Other Federal 0.0
55 to 64 9.9	State Funds 0.0
65 to 74 14.1	Private Insurance 21.8
75 to 84 32.9	Self Pay 1.3
85 & over 19.8	Other 0.0
	TOTAL PATIENTS 312

Males 39.6% Females 60.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 7.1%	Digestive Disorders 3.2%
Cancer 8.5	Genitourinary Sys. 3.2
Diabetes 2.8	Preg. & Childbirth 0.4
Diseases of Blood 0.7	Arthropathies 12.0
Dementia/Alzheimers 0.4	Osteopathies 1.8
Psychoses/Neuroses 0.4	Perinatal Period 5.3
Central Nervous Sys. 2.8	Ill-Defined Cond. 14.1
Paralysis/CP 1.1	Fractures 3.5
Cardiovascular 20.1	Wounds, Burns 1.1
Stroke 1.1	Compl. of Surgery 4.9
Respiratory 3.9	Other Conditions 1.8

REVENUE

Billings \$	839,379
Disallowances	94,082
Collections	745,297
Other	0
Total	745,297

EXPENSES

Total \$	746,007
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STAFFING

FTES

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 4.6

Licensed Practical Nurses 0.2

Home Health Aides 1.8

Physical Therapists 1.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 3.2

Homemakers 0.0

Other Staff 1.0

TOTAL FTES 13.8

Door County Memorial Home Health

1300 Egg Harbor Road, #110

Sturgeon Bay WI 54235

Door County

COUNTIES SERVED

Door

Kewaunee

(920) 743-7983

License Number: 187

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 319

TOTAL NUMBER OF ADMISSIONS 279**PERCENT ADMISSIONS FROM:**

Private Residences	30.5%
General Hospitals	52.7
Nursing Homes	13.6
Other	3.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 285

PERCENT DISCHARGES TO:

Private Residences	69.5%
General Hospitals	2.1
Nursing Homes	9.1
Deaths	9.5
Other	9.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	319	5,706	17.9
Home Health Aide	112	2,977	26.6
Physical Therapy	114	775	6.8
Spch/Occ/Resp Therapy	65	355	5.5
Medical Social Service	87	226	2.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	84	3,308	39.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,347	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 65.6%
4 to 24 2.8	Medicaid 10.9
25 to 54 11.0	Other Federal 0.6
55 to 64 8.2	State Funds 0.0
65 to 74 21.3	Private Insurance 14.0
75 to 84 34.2	Self Pay 6.6
85 & over 21.9	Other 2.3
	TOTAL PATIENTS 349

Males 40.1% Females 59.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.9%	Digestive Disorders 6.9%
Cancer 10.0	Genitourinary Sys. 2.8
Diabetes 3.8	Preg. & Childbirth 0.0
Diseases of Blood 2.2	Arthropathies 11.9
Dementia/Alzheimers 0.3	Osteopathies 2.8
Psychoses/Neuroses 2.2	Perinatal Period 0.3
Central Nervous Sys. 3.1	Ill-Defined Cond. 3.4
Paralysis/CP 1.9	Fractures 4.4
Cardiovascular 17.9	Wounds, Burns 1.3
Stroke 3.1	Compl. of Surgery 2.2
Respiratory 9.4	Other Conditions 8.2

REVENUE

Billings	\$ 1,730,363
Disallowances	724,273
Collections	1,006,090
Other	0
Total	1,006,090

EXPENSES

Total	\$ 1,005,900
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	5.0
Licensed Practical Nurses	0.0
Home Health Aides	2.3
Physical Therapists	0.1
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	0.1
Personal Care Workers	5.2
Homemakers	0.0
Other Staff	2.8
TOTAL FTEs	17.7

Porter-Kiehnau Home Care System

945 Egg Harbor Road
Sturgeon Bay WI 54235

Door County

(920) 458-4314

COUNTIES SERVED

Brown
Door
Kewaunee
Manitowoc

License Number: 1008

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 32

Number of unduplicated patients in 2000 = 200

TOTAL NUMBER OF ADMISSIONS 172

PERCENT ADMISSIONS FROM:

Private Residences	29.7%
General Hospitals	44.8
Nursing Homes	13.4
Other	12.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	168	2,634	15.7
Home Health Aide	83	7,423	89.4
Physical Therapy	38	246	6.5
Spch/Occ/Resp Therapy	14	65	4.6
Medical Social Service	20	66	3.3
Private Duty Nursing	5	25	5.0
Personal Care/PC RN Supv.	61	3,557	58.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	6	250	41.7
TOTAL	XXXXXXX	14,266	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 161

PERCENT DISCHARGES TO:

Private Residences	62.1%
General Hospitals	23.0
Nursing Homes	9.3
Deaths	3.1
Other	2.5

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 51.5%
4 to 24 4.0	Medicaid 28.0
25 to 54 13.0	Other Federal 0.0
55 to 64 10.5	State Funds 0.0
65 to 74 21.5	Private Insurance 13.5
75 to 84 30.5	Self Pay 7.0
85 & over 20.5	Other 0.0
	TOTAL PATIENTS 200

Males 35.5% Females 64.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 4.5%
Cancer 4.5	Genitourinary Sys. 2.5
Diabetes 3.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 9.0
Dementia/Alzheimers 0.0	Osteopathies 1.5
Psychoses/Neuroses 1.5	Perinatal Period 0.0
Central Nervous Sys. 7.0	Ill-Defined Cond. 4.0
Paralysis/CP 2.5	Fractures 5.5
Cardiovascular 20.0	Wounds, Burns 6.5
Stroke 3.5	Compl. of Surgery 1.5
Respiratory 10.5	Other Conditions 12.5

REVENUE

Billings \$	971,703
Disallowances	247,371
Collections	724,332
Other	246
Total	724,578

EXPENSES

Total \$	959,082
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	7.2
Licensed Practical Nurses	0.0
Home Health Aides	13.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	4.5
TOTAL FTEs	28.4

Douglas County Health Department-Home Health Care
1313 Belknap Street
Superior WI 54880

Douglas County

COUNTIES SERVED
Douglas

(715) 395-1601

License Number: 50
Ownership of Agency: County
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 18
Number of unduplicated patients in 2000 = 290

TOTAL NUMBER OF ADMISSIONS 307

PERCENT ADMISSIONS FROM:

Private Residences	0.3%
General Hospitals	90.9
Nursing Homes	0.0
Other	8.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 305

PERCENT DISCHARGES TO:

Private Residences	74.4%
General Hospitals	4.6
Nursing Homes	0.3
Deaths	2.6
Other	18.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	290	3,943	13.6
Home Health Aide	120	2,082	17.4
Physical Therapy	141	1,235	8.8
Spch/Occ/Resp Therapy	89	535	6.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,795	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.1%	Medicare 68.6%
4 to 24 0.7	Medicaid 17.9
25 to 54 6.2	Other Federal 3.1
55 to 64 7.6	State Funds 0.0
65 to 74 10.3	Private Insurance 8.6
75 to 84 40.3	Self Pay 1.7
85 & over 32.8	Other 0.0
	TOTAL PATIENTS 290

Males 37.2% Females 62.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 3.1%
Cancer 3.1	Genitourinary Sys. 2.4
Diabetes 5.2	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 15.2
Dementia/Alzheimers 0.3	Osteopathies 3.8
Psychoses/Neuroses 2.8	Perinatal Period 0.3
Central Nervous Sys. 0.7	Ill-Defined Cond. 6.2
Paralysis/CP 0.7	Fractures 8.3
Cardiovascular 26.2	Wounds, Burns 1.4
Stroke 1.7	Compl. of Surgery 1.4
Respiratory 5.5	Other Conditions 9.3

REVENUE

Billings	\$ 861,161
Disallowances	101,739
Collections	759,422
Other	0
Total	759,422

EXPENSES

Total	\$ 2,180,256
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.2
Licensed Practical Nurses	0.0
Home Health Aides	2.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTEs	13.2

The Dove, Inc.

1416 Cumming Avenue, Suite 2B
Superior WI 54880

Douglas County

COUNTIES SERVED

Douglas

(715) 392-3133

License Number: 172

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 58

Number of unduplicated patients in 2000 = 191

TOTAL NUMBER OF ADMISSIONS 110

PERCENT ADMISSIONS FROM:

Private Residences	26.4%
General Hospitals	46.4
Nursing Homes	17.3
Other	10.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	131	2,532	19.3
Home Health Aide	49	1,880	38.4
Physical Therapy	38	269	7.1
Spch/Occ/Resp Therapy	14	56	4.0
Medical Social Service	0	0	0.0
Private Duty Nursing	4	1,295	323.8
Personal Care/PC RN Supv.	139	11,215	80.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	15	1,983	132.2
TOTAL	XXXXXXX	19,230	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 113

PERCENT DISCHARGES TO:

Private Residences	64.6%
General Hospitals	21.2
Nursing Homes	8.8
Deaths	2.7
Other	2.7

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 30.7%
4 to 24 5.8	Medicaid 49.5
25 to 54 22.0	Other Federal 1.4
55 to 64 12.6	State Funds 6.4
65 to 74 15.2	Private Insurance 6.9
75 to 84 29.3	Self Pay 5.0
85 & over 15.2	Other 0.0
	TOTAL PATIENTS 218

Males 38.7% Females 61.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 2.1	Genitourinary Sys. 0.0
Diabetes 5.2	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 8.9
Dementia/Alzheimers 5.8	Osteopathies 1.6
Psychoses/Neuroses 11.5	Perinatal Period 0.0
Central Nervous Sys. 4.7	Ill-Defined Cond. 6.8
Paralysis/CP 2.1	Fractures 3.1
Cardiovascular 8.9	Wounds, Burns 12.6
Stroke 8.9	Compl. of Surgery 0.0
Respiratory 4.2	Other Conditions 12.6

REVENUE

Billings	\$ 1,129,888
Disallowances	169,998
Collections	959,890
Other	0
Total	959,890

EXPENSES

Total	\$ 1,045,711
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	3.0
Registered Nurses	5.8
Licensed Practical Nurses	2.5
Home Health Aides	3.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	14.4
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	33.7

Aurora Community Health, Inc.

406 Technology Drive, East #B
Menomonie WI 54751

Dunn County

(715) 235-4667

License Number: 310

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 117

Number of unduplicated patients in 2000 = 142

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	15	342	22.8
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	284	110,269	388.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	110,611	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 17.6	Medicaid 100.0
25 to 54 56.3	Other Federal 0.0
55 to 64 16.9	State Funds 0.0
65 to 74 6.3	Private Insurance 0.0
75 to 84 2.8	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 142

Males 52.8% Females 47.2 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS	PERCENT	SECONDARY DIAGNOSIS	PERCENT
Infectious Disorders	0.0%	Digestive Disorders	0.0%
Cancer	0.0	Genitourinary Sys.	0.0
Diabetes	0.0	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	0.0
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	12.0	Perinatal Period	0.0
Central Nervous Sys.	11.3	Ill-Defined Cond.	0.0
Paralysis/CP	3.5	Fractures	0.0
Cardiovascular	0.0	Wounds, Burns	9.2
Stroke	1.4	Compl. of Surgery	0.0
Respiratory	0.0	Other Conditions	62.7

COUNTIES SERVED

Barron
Burnett
Clark
Dunn
Eau Claire
Jackson
Pierce
Polk
Portage
Rusk
St. Croix
Sawyer
Taylor
Trempealeau
Washburn

TOTAL NUMBER OF ADMISSIONS 14

PERCENT ADMISSIONS FROM:

Private Residences	42.9%
General Hospitals	0.0
Nursing Homes	0.0
Other	57.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 36

PERCENT DISCHARGES TO:

Private Residences	13.9%
General Hospitals	2.8
Nursing Homes	5.6
Deaths	8.3
Other	69.4

STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	3.5
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTEs	6.0

REVENUE

Billings	\$ 3,206,610
Disallowances	0
Collections	3,206,610
Other	0
Total	3,206,610

EXPENSES

Total	\$ 3,320,548
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Dunn County Home Health Care

800 Wilson Avenue
Menomonie WI 54751

Dunn County

COUNTIES SERVED

Dunn

(715) 232-1518

License Number: 51

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 9

Number of unduplicated patients in 2000 = 201

TOTAL NUMBER OF ADMISSIONS 200

PERCENT ADMISSIONS FROM:

Private Residences	23.0%
General Hospitals	50.0
Nursing Homes	26.5
Other	0.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	201	2,982	14.8
Home Health Aide	67	1,462	21.8
Physical Therapy	27	160	5.9
Spch/Occ/Resp Therapy	11	62	5.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,666	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 208

PERCENT DISCHARGES TO:

Private Residences	50.5%
General Hospitals	31.3
Nursing Homes	6.3
Deaths	1.9
Other	10.1

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.5%	Medicare 47.2%
4 to 24 1.5	Medicaid 23.6
25 to 54 14.4	Other Federal 0.9
55 to 64 5.0	State Funds 1.7
65 to 74 17.9	Private Insurance 19.3
75 to 84 30.3	Self Pay 7.3
85 & over 29.4	Other 0.0
	TOTAL PATIENTS 233

Males 39.8% Females 60.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 2.0%
Cancer 4.5	Genitourinary Sys. 2.5
Diabetes 7.5	Preg. & Childbirth 0.5
Diseases of Blood 0.5	Arthropathies 6.5
Dementia/Alzheimers 0.0	Osteopathies 2.0
Psychoses/Neuroses 0.5	Perinatal Period 0.0
Central Nervous Sys. 3.0	Ill-Defined Cond. 4.5
Paralysis/CP 1.0	Fractures 7.0
Cardiovascular 20.9	Wounds, Burns 3.5
Stroke 4.5	Compl. of Surgery 2.0
Respiratory 11.9	Other Conditions 14.4

REVENUE

Billings \$	528,447
Disallowances	160,264
Collections	368,183
Other	75,965
Total	444,148

EXPENSES

Total \$	527,914
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STAFFING**FTEs**

Administrators	1.8
Reg. Nurse Supervisors	0.0
Registered Nurses	3.8
Licensed Practical Nurses	0.6
Home Health Aides	1.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.3
TOTAL FTEs	10.6

Gentiva Health Services

392 Red Cedar Street, Suite 4
Menomonie WI 54751

Dunn County

(715) 235-8077

License Number: 211

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 19

Number of unduplicated patients in 2000 = 98

COUNTIES SERVED

Barron

Buffalo

Chippewa

Dunn

Eau Claire

Pepin

Pierce

Polk

St. Croix

Trempealeau

TOTAL NUMBER OF ADMISSIONS 74

PERCENT ADMISSIONS FROM:

Private Residences 74.3%

General Hospitals 5.4

Nursing Homes 0.0

Other 20.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	92	1,499	16.3
Home Health Aide	9	668	74.2
Physical Therapy	10	57	5.7
Spch/Occ/Resp Therapy	1	16	16.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	44	8,114	184.4
Other Home Health Care	9	11	1.2
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	10,365	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 70

PERCENT DISCHARGES TO:

Private Residences 82.9%

General Hospitals 2.9

Nursing Homes 4.3

Deaths 0.0

Other 10.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.0%	Medicare 6.2%
4 to 24 22.4	Medicaid 22.1
25 to 54 34.7	Other Federal 0.0
55 to 64 12.2	State Funds 0.0
65 to 74 11.2	Private Insurance 58.4
75 to 84 13.3	Self Pay 13.3
85 & over 4.1	Other 0.0
	TOTAL PATIENTS 113

Males 52.0% Females 48.0 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS	PERCENT	PRIMARY DIAGNOSIS	PERCENT
Infectious Disorders	1.0%	Digestive Disorders	1.0%
Cancer	1.0	Genitourinary Sys.	1.0
Diabetes	3.1	Preg. & Childbirth	0.0
Diseases of Blood	1.0	Arthropathies	1.0
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.0	Perinatal Period	0.0
Central Nervous Sys.	18.4	Ill-Defined Cond.	3.1
Paralysis/CP	0.0	Fractures	3.1
Cardiovascular	14.3	Wounds, Burns	12.2
Stroke	0.0	Compl. of Surgery	2.0
Respiratory	5.1	Other Conditions	32.7

REVENUE

Billings	\$	1,271,446
Disallowances		291,180
Collections		980,266
Other		0
Total		980,266

EXPENSES

Total	\$	971,572
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STAFFING**FTEs**

Administrators 0.9

Reg. Nurse Supervisors 0.9

Registered Nurses 7.1

Licensed Practical Nurses 5.3

Home Health Aides 0.3

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 5.9

Homemakers 0.0

Other Staff 1.7

TOTAL FTEs 22.0

Gentiva Health Services

392 Red Cedar Street, Suite 4
Menomonie WI 54751

Dunn County

(715) 235-8077

License Number: 286

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 34

COUNTIES SERVED

Dunn
Eau Claire
Pepin
Pierce
Polk
St. Croix

TOTAL NUMBER OF ADMISSIONS 17

PERCENT ADMISSIONS FROM:

Private Residences	82.4%
General Hospitals	11.8
Nursing Homes	0.0
Other	5.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 19

PERCENT DISCHARGES TO:

Private Residences	52.6%
General Hospitals	0.0
Nursing Homes	10.5
Deaths	0.0
Other	36.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	27	3,166	117.3
Home Health Aide	4	99	24.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	9	1,125	125.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,390	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.9%	Medicare 0.0%
4 to 24 50.0	Medicaid 0.0
25 to 54 17.6	Other Federal 0.0
55 to 64 5.9	State Funds 0.0
65 to 74 2.9	Private Insurance 80.0
75 to 84 17.6	Self Pay 20.0
85 & over 2.9	Other 0.0
	TOTAL PATIENTS 45

Males 58.8% Females 41.2 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	0.0%
Cancer	0.0	Genitourinary Sys.	0.0
Diabetes	0.0	Preg. & Childbirth	0.0
Diseases of Blood	0.0	Arthropathies	2.9
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.0	Perinatal Period	0.0
Central Nervous Sys.	35.3	Ill-Defined Cond.	5.9
Paralysis/CP	0.0	Fractures	2.9
Cardiovascular	14.7	Wounds, Burns	5.9
Stroke	0.0	Compl. of Surgery	0.0
Respiratory	2.9	Other Conditions	29.4

REVENUE

Billings	\$	24,038
Disallowances		1,027
Collections		23,011
Other		0
Total		23,011

EXPENSES

Total	\$	32,229
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	0.1
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	0.3
TOTAL FTEs	0.8

Lifenet, LLC

505 Dewey Street, South, Suite 206

Eau Claire WI 54701

Eau Claire County

(715) 835-4111

License Number: 335

Ownership of Agency: Limited Liability Company

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 43

Number of unduplicated patients in 2000 = 126

COUNTIES SERVED

Chippewa

Clark

Eau Claire

Jackson

Monroe

Taylor

Trempealeau

TOTAL NUMBER OF ADMISSIONS 46**PERCENT ADMISSIONS FROM:**

Private Residences 73.9%

General Hospitals 6.5

Nursing Homes 6.5

Other 13.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 56

PERCENT DISCHARGES TO:

Private Residences 32.1%

General Hospitals 14.3

Nursing Homes 39.3

Deaths 3.6

Other 10.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	126	756	6.0
Home Health Aide	1	306	306.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	238	21,364	89.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	22,426	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 12.7	Medicaid 95.2
25 to 54 22.2	Other Federal 0.0
55 to 64 10.3	State Funds 0.0
65 to 74 11.9	Private Insurance 4.0
75 to 84 21.4	Self Pay 0.8
85 & over 21.4	Other 0.0
	TOTAL PATIENTS 126

Males 29.4% Females 70.6 %

STAFFING FTES

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 1.0

Licensed Practical Nurses 0.0

Home Health Aides 20.8

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 10.7

Homemakers 0.0

Other Staff 10.0

TOTAL FTES 44.5

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.8	Genitourinary Sys. 2.4
Diabetes 10.3	Preg. & Childbirth 0.0
Diseases of Blood 0.8	Arthropathies 8.7
Dementia/Alzheimers 4.0	Osteopathies 3.2
Psychoses/Neuroses 4.0	Perinatal Period 0.8
Central Nervous Sys. 11.1	Ill-Defined Cond. 0.0
Paralysis/CP 12.7	Fractures 0.8
Cardiovascular 11.1	Wounds, Burns 2.4
Stroke 7.1	Compl. of Surgery 0.0
Respiratory 4.0	Other Conditions 15.9

REVENUE

Billings \$	898,663
Disallowances	211,996
Collections	686,667
Other	186
Total	686,853

EXPENSES

Total \$	690,322
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Mission Home Health-Lutheran Social Services

1101 West Clairemont Avenue, Suite 2G
Eau Claire WI 54701 Eau Claire County

(715) 855-5043

COUNTIES SERVED

Chippewa
Clark
Eau Claire
Monroe

License Number: 1010

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 72

Number of unduplicated patients in 2000 = 91

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	20	680	34.0
Home Health Aide	7	140	20.0
Physical Therapy	1	2	2.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	146	58,053	397.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	58,875	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 12.1	Medicaid 77.8
25 to 54 59.3	Other Federal 0.0
55 to 64 9.9	State Funds 0.0
65 to 74 7.7	Private Insurance 1.0
75 to 84 3.3	Self Pay 1.0
85 & over 7.7	Other 20.2
	TOTAL PATIENTS 99

Males 41.8% Females 58.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 1.1%
Cancer 1.1	Genitourinary Sys. 1.1
Diabetes 2.2	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.3
Dementia/Alzheimers 0.0	Osteopathies 1.1
Psychoses/Neuroses 8.8	Perinatal Period 1.1
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 5.5	Fractures 1.1
Cardiovascular 5.5	Wounds, Burns 1.1
Stroke 0.0	Compl. of Surgery 1.1
Respiratory 0.0	Other Conditions 65.9

REVENUE

Billings	\$ 2,403,988
Disallowances	361,453
Collections	2,042,535
Other	0
Total	2,042,535

EXPENSES

Total	\$ 2,250,447
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TOTAL NUMBER OF ADMISSIONS 26

PERCENT ADMISSIONS FROM:

Private Residences	34.6%
General Hospitals	19.2
Nursing Homes	11.5
Other	34.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 16

PERCENT DISCHARGES TO:

Private Residences	56.3%
General Hospitals	12.5
Nursing Homes	12.5
Deaths	6.3
Other	12.5

STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	2.3
Licensed Practical Nurses	0.0
Home Health Aides	1.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	69.7
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	75.0

Northwest Wisconsin Homecare, Inc.

2620 Stein Boulevard, Box 2060

Eau Claire WI 54702

Eau Claire County

(715) 831-0100

License Number: 127

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 86

Number of unduplicated patients in 2000 = 946

COUNTIES SERVED

Barron

Buffalo

Chippewa

Clark

Dunn

Eau Claire

Jackson

Pepin

Pierce

Rusk

St. Croix

Taylor

Trempealeau

TOTAL NUMBER OF ADMISSIONS 978**PERCENT ADMISSIONS FROM:**

Private Residences 35.8%

General Hospitals 51.6

Nursing Homes 11.8

Other 0.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 938

PERCENT DISCHARGES TO:

Private Residences 66.0%

General Hospitals 22.2

Nursing Homes 2.7

Deaths 3.8

Other 5.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	946	13,969	14.8
Home Health Aide	368	17,092	46.4
Physical Therapy	332	1,623	4.9
Spch/Occ/Resp Therapy	119	364	3.1
Medical Social Service	67	326	4.9
Private Duty Nursing	19	6,919	364.2
Personal Care/PC RN Supv.	102	4,569	44.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	128	7,666	59.9
TOTAL	XXXXXXX	52,528	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 69.7%
4 to 24 3.8	Medicaid 10.1
25 to 54 11.4	Other Federal 0.8
55 to 64 7.9	State Funds 0.1
65 to 74 18.6	Private Insurance 15.8
75 to 84 33.0	Self Pay 3.5
85 & over 23.0	Other 0.0
	TOTAL PATIENTS 946

Males 39.3% Females 60.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 1.1%
Cancer 8.9	Genitourinary Sys. 3.7
Diabetes 3.1	Preg. & Childbirth 0.1
Diseases of Blood 1.0	Arthropathies 7.4
Dementia/Alzheimers 1.3	Osteopathies 2.2
Psychoses/Neuroses 0.4	Perinatal Period 0.6
Central Nervous Sys. 2.4	Ill-Defined Cond. 3.9
Paralysis/CP 0.7	Fractures 6.6
Cardiovascular 14.4	Wounds, Burns 3.4
Stroke 1.1	Compl. of Surgery 2.6
Respiratory 8.5	Other Conditions 25.8

REVENUE

Billings \$	4,699,370
Disallowances	798,422
Collections	3,900,948
Other	9,324
Total	3,910,272

EXPENSES

Total \$	4,175,345
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	9.0
Registered Nurses	32.7
Licensed Practical Nurses	7.6
Home Health Aides	20.2
Physical Therapists	1.0
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	2.0
Other Therapeutic Staff	0.0
Personal Care Workers	7.1
Homemakers	9.5
Other Staff	27.7
TOTAL FTEs	118.0

Fond du Lac County Home Health Service

160 South Macy Street

Fond du Lac WI 54935

Fond du Lac County

COUNTIES SERVED

Fond du Lac

(920) 929-3085

License Number: 54

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 40

Number of unduplicated patients in 2000 = 299

TOTAL NUMBER OF ADMISSIONS 268**PERCENT ADMISSIONS FROM:**

Private Residences 61.2%

General Hospitals 27.2

Nursing Homes 7.8

Other 3.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 278

PERCENT DISCHARGES TO:

Private Residences 65.8%

General Hospitals 20.5

Nursing Homes 8.6

Deaths 1.4

Other 3.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	145	3,210	22.1
Home Health Aide	82	2,579	31.5
Physical Therapy	20	247	12.4
Spch/Occ/Resp Therapy	3	25	8.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	294	8,036	27.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,097	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 27.1%
4 to 24 0.0	Medicaid 26.3
25 to 54 10.7	Other Federal 17.0
55 to 64 5.7	State Funds 22.5
65 to 74 13.0	Private Insurance 1.1
75 to 84 27.8	Self Pay 5.2
85 & over 42.8	Other 0.8
	TOTAL PATIENTS 365

Males 42.5% Females 57.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 0.3%
Cancer 3.7	Genitourinary Sys. 1.7
Diabetes 4.0	Preg. & Childbirth 0.0
Diseases of Blood 5.7	Arthropathies 23.7
Dementia/Alzheimers 1.0	Osteopathies 2.7
Psychoses/Neuroses 4.0	Perinatal Period 0.0
Central Nervous Sys. 4.0	Ill-Defined Cond. 7.4
Paralysis/CP 2.0	Fractures 4.3
Cardiovascular 13.0	Wounds, Burns 3.3
Stroke 3.0	Compl. of Surgery 0.0
Respiratory 3.7	Other Conditions 11.7

REVENUE

Billings \$	800,333
Disallowances	69,750
Collections	730,583
Other	11,369
Total	741,952

EXPENSES

Total \$	849,386
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	18.5
Licensed Practical Nurses	0.0
Home Health Aides	4.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.8
Homemakers	0.0
Other Staff	10.5
TOTAL FTEs	42.5

St. Agnes Hospital-Home Care Service

239 Trowbridge Drive

Fond du Lac WI 54936

Fond du Lac County

(920) 923-7959

License Number: 55

Ownership of Agency: Nonprofit Church

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 75

Number of unduplicated patients in 2000 = 1,184

COUNTIES SERVED

Calumet

Dodge

Fond du Lac

Green Lake

Washburn

Washington

Winnebago

TOTAL NUMBER OF ADMISSIONS 929**PERCENT ADMISSIONS FROM:**

Private Residences 34.0%

General Hospitals 57.9

Nursing Homes 6.7

Other 1.4

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 947

PERCENT DISCHARGES TO:

Private Residences 64.2%

General Hospitals 15.3

Nursing Homes 2.2

Deaths 1.2

Other 17.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	500	9,801	19.6
Home Health Aide	308	5,515	17.9
Physical Therapy	180	1,919	10.7
Spch/Occ/Resp Therapy	90	980	10.9
Medical Social Service	254	467	1.8
Private Duty Nursing	60	1,952	32.5
Personal Care/PC RN Supv.	536	13,493	25.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	82	2,260	27.6
TOTAL	XXXXXXX	36,387	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.5%	Medicare 62.0%
4 to 24 3.2	Medicaid 8.8
25 to 54 12.7	Other Federal 3.7
55 to 64 6.4	State Funds 0.0
65 to 74 18.0	Private Insurance 16.8
75 to 84 26.9	Self Pay 8.7
85 & over 30.3	Other 0.0
	TOTAL PATIENTS 1,184

Males 64.6% Females 35.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.9%	Digestive Disorders 5.7%
Cancer 9.4	Genitourinary Sys. 4.1
Diabetes 3.5	Preg. & Childbirth 0.1
Diseases of Blood 1.9	Arthropathies 7.9
Dementia/Alzheimers 0.0	Osteopathies 1.4
Psychoses/Neuroses 0.1	Perinatal Period 0.8
Central Nervous Sys. 2.4	Ill-Defined Cond. 8.2
Paralysis/CP 0.6	Fractures 6.8
Cardiovascular 15.8	Wounds, Burns 2.6
Stroke 4.1	Compl. of Surgery 4.7
Respiratory 8.8	Other Conditions 10.1

REVENUE

Billings \$	3,649,471
Disallowances	1,001,998
Collections	2,647,473
Other	0
Total	2,647,473

EXPENSES

Total \$	3,033,394
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.8
Registered Nurses	19.7
Licensed Practical Nurses	8.5
Home Health Aides	23.2
Physical Therapists	1.9
Occupational Therapists	0.7
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.6
Other Therapeutic Staff	2.7
Personal Care Workers	4.0
Homemakers	0.0
Other Staff	6.1
TOTAL FTEs	70.0

Country Care Connection

105 West Pioneer

Crandon WI 54520

Forest County

COUNTIES SERVED

Forest

Lincoln

Oneida

(715) 478-3325

License Number: 270

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 3

Number of unduplicated patients in 2000 = 25

TOTAL NUMBER OF ADMISSIONS 18**PERCENT ADMISSIONS FROM:**

Private Residences 44.4%

General Hospitals 22.2

Nursing Homes 33.3

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 21

PERCENT DISCHARGES TO:

Private Residences 61.9%

General Hospitals 14.3

Nursing Homes 0.0

Deaths 4.8

Other 19.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	15	195	13.0
Home Health Aide	5	88	17.6
Physical Therapy	6	81	13.5
Spch/Occ/Resp Therapy	2	19	9.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	2	3	1.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	386	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 44.0%
4 to 24 0.0	Medicaid 36.0
25 to 54 36.0	Other Federal 0.0
55 to 64 8.0	State Funds 0.0
65 to 74 24.0	Private Insurance 20.0
75 to 84 28.0	Self Pay 0.0
85 & over 4.0	Other 0.0
	TOTAL PATIENTS 25

Males 44.0% Females 56.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 4.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 16.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 4.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 8.0	Perinatal Period 0.0
Central Nervous Sys. 16.0	Ill-Defined Cond. 8.0
Paralysis/CP 0.0	Fractures 12.0
Cardiovascular 12.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 12.0	Other Conditions 8.0

REVENUE

Billings \$	66,444
Disallowances	32,335
Collections	34,109
Other	0
Total	34,109

EXPENSES

Total \$	73,992
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTEs	2.4

Forest County Health Department

200 East Madison/Courthouse

Crandon WI 54520

Forest County

COUNTIES SERVED

Forest

(715) 478-3371

License Number: 56

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 7

Number of unduplicated patients in 2000 = 84

TOTAL NUMBER OF ADMISSIONS 68**PERCENT ADMISSIONS FROM:**

Private Residences 11.8%

General Hospitals 42.6

Nursing Homes 17.6

Other 27.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	69	659	9.6
Home Health Aide	30	626	20.9
Physical Therapy	19	132	6.9
Spch/Occ/Resp Therapy	5	21	4.2
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	24	517	21.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,955	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 77

PERCENT DISCHARGES TO:

Private Residences 58.4%

General Hospitals 14.3

Nursing Homes 11.7

Deaths 7.8

Other 7.8

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 54.5%
4 to 24 2.4	Medicaid 25.7
25 to 54 7.1	Other Federal 0.0
55 to 64 7.1	State Funds 0.0
65 to 74 11.9	Private Insurance 6.9
75 to 84 46.4	Self Pay 12.9
85 & over 25.0	Other 0.0
	TOTAL PATIENTS 101

Males 36.9% Females 63.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 2.4%	Digestive Disorders 0.0%
Cancer 7.1	Genitourinary Sys. 1.2
Diabetes 1.2	Preg. & Childbirth 1.2
Diseases of Blood 2.4	Arthropathies 13.1
Dementia/Alzheimers 1.2	Osteopathies 2.4
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 10.7
Paralysis/CP 0.0	Fractures 6.0
Cardiovascular 21.4	Wounds, Burns 7.1
Stroke 3.6	Compl. of Surgery 1.2
Respiratory 4.8	Other Conditions 13.1

REVENUE

Billings \$	138,205
Disallowances	20,006
Collections	118,199
Other	0
Total	118,199

EXPENSES

Total \$	168,111
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 0.0

Licensed Practical Nurses 0.0

Home Health Aides 0.4

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 0.6

Homemakers 0.0

Other Staff 1.0

TOTAL FTEs 4.0

Grant County Home Nursing Service

111 South Jefferson Street

Lancaster WI 53813

Grant County

COUNTIES SERVED

Grant

(608) 723-6416

License Number: 57

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 8

Number of unduplicated patients in 2000 = 330

TOTAL NUMBER OF ADMISSIONS 324**PERCENT ADMISSIONS FROM:**

Private Residences 27.5%

General Hospitals 52.5

Nursing Homes 14.8

Other 5.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	268	2,938	11.0
Home Health Aide	59	905	15.3
Physical Therapy	76	667	8.8
Spch/Occ/Resp Therapy	16	73	4.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	129	2,943	22.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	7,526	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 333

PERCENT DISCHARGES TO:

Private Residences 57.7%

General Hospitals 23.7

Nursing Homes 8.1

Deaths 1.2

Other 9.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.3%	Medicare 39.6%
4 to 24 1.8	Medicaid 23.0
25 to 54 11.2	Other Federal 0.5
55 to 64 11.8	State Funds 0.0
65 to 74 21.8	Private Insurance 13.9
75 to 84 31.5	Self Pay 23.0
85 & over 21.5	Other 0.0
	TOTAL PATIENTS 366

Males 34.8% Females 65.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.8%	Digestive Disorders 0.6%
Cancer 5.5	Genitourinary Sys. 1.2
Diabetes 5.2	Preg. & Childbirth 0.3
Diseases of Blood 0.6	Arthropathies 10.9
Dementia/Alzheimers 0.6	Osteopathies 1.5
Psychoses/Neuroses 3.0	Perinatal Period 0.0
Central Nervous Sys. 1.8	Ill-Defined Cond. 3.6
Paralysis/CP 0.9	Fractures 5.5
Cardiovascular 16.7	Wounds, Burns 16.4
Stroke 3.6	Compl. of Surgery 0.3
Respiratory 9.1	Other Conditions 10.9

REVENUE

Billings \$	415,982
Disallowances	126,024
Collections	289,958
Other	0
Total	289,958

EXPENSES

Total \$	535,299
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 0.6

Registered Nurses 5.0

Licensed Practical Nurses 0.0

Home Health Aides 0.6

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 2.0

Homemakers 0.0

Other Staff 2.0

TOTAL FTEs 11.2

Homeward Bound Home Health

130 West Elm Street, PO Box 503
Lancaster WI 53813

Grant County

(608) 723-6601

License Number: 330

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 40

Number of unduplicated patients in 2000 = 282

COUNTIES SERVED

Columbia

Crawford

Grant

Iowa

Juneau

LaFayette

Richland

Sauk

Vernon

TOTAL NUMBER OF ADMISSIONS 184

PERCENT ADMISSIONS FROM:

Private Residences 42.4%

General Hospitals 39.7

Nursing Homes 12.0

Other 6.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 148

PERCENT DISCHARGES TO:

Private Residences 68.9%

General Hospitals 3.4

Nursing Homes 8.8

Deaths 6.1

Other 12.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	109	927	8.5
Home Health Aide	40	913	22.8
Physical Therapy	50	226	4.5
Spch/Occ/Resp Therapy	11	53	4.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	342	21,531	63.0
Other Home Health Care	1	568	568.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	24,218	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 18.4%
4 to 24 3.5	Medicaid 69.9
25 to 54 14.5	Other Federal 0.0
55 to 64 8.5	State Funds 0.0
65 to 74 14.9	Private Insurance 8.9
75 to 84 32.6	Self Pay 2.8
85 & over 25.9	Other 0.0
	TOTAL PATIENTS 282

Males 31.6% Females 68.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.4%	Digestive Disorders 1.4%
Cancer 7.1	Genitourinary Sys. 2.1
Diabetes 3.9	Preg. & Childbirth 0.0
Diseases of Blood 0.4	Arthropathies 16.0
Dementia/Alzheimers 3.5	Osteopathies 1.4
Psychoses/Neuroses 6.4	Perinatal Period 0.0
Central Nervous Sys. 3.2	Ill-Defined Cond. 3.9
Paralysis/CP 2.5	Fractures 6.0
Cardiovascular 16.7	Wounds, Burns 3.9
Stroke 6.7	Compl. of Surgery 0.0
Respiratory 8.2	Other Conditions 6.4

REVENUE

Billings \$	1,209,604
Disallowances	202,250
Collections	1,007,354
Other	1,553
Total	1,008,907

EXPENSES

Total \$	981,640
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STAFFING**FTEs**

Administrators 0.0

Reg. Nurse Supervisors 1.0

Registered Nurses 5.1

Licensed Practical Nurses 0.0

Home Health Aides 1.8

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 40.1

Homemakers 0.0

Other Staff 3.8

TOTAL FTEs 51.8

The Monroe Clinic Home Care

515 22nd Avenue

Monroe WI 53566

Green County

(800) 367-8406

COUNTIES SERVED

Dane

Green

Iowa

LaFayette

Richland

License Number: 142

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 13

Number of unduplicated patients in 2000 = 404

TOTAL NUMBER OF ADMISSIONS 395**PERCENT ADMISSIONS FROM:**

Private Residences 9.1%

General Hospitals 86.6

Nursing Homes 3.5

Other 0.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 405

PERCENT DISCHARGES TO:

Private Residences 73.8%

General Hospitals 7.2

Nursing Homes 3.7

Deaths 2.2

Other 13.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	288	3,911	13.6
Home Health Aide	68	917	13.5
Physical Therapy	190	1,706	9.0
Spch/Occ/Resp Therapy	36	199	5.5
Medical Social Service	16	47	2.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,780	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.0%	Medicare 74.8%
4 to 24 1.7	Medicaid 4.2
25 to 54 13.4	Other Federal 0.2
55 to 64 12.4	State Funds 0.0
65 to 74 21.3	Private Insurance 20.5
75 to 84 28.7	Self Pay 0.2
85 & over 21.5	Other 0.0
	TOTAL PATIENTS 404

Males 44.1% Females 55.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 5.0%
Cancer 8.4	Genitourinary Sys. 3.2
Diabetes 1.2	Preg. & Childbirth 0.5
Diseases of Blood 1.7	Arthropathies 17.6
Dementia/Alzheimers 0.0	Osteopathies 3.0
Psychoses/Neuroses 0.5	Perinatal Period 0.2
Central Nervous Sys. 2.2	Ill-Defined Cond. 5.4
Paralysis/CP 0.5	Fractures 12.6
Cardiovascular 10.6	Wounds, Burns 3.2
Stroke 3.0	Compl. of Surgery 2.2
Respiratory 5.7	Other Conditions 12.1

REVENUE

Billings \$	767,760
Disallowances	212,407
Collections	555,353
Other	0
Total	555,353

EXPENSES

Total \$	668,056
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	5.3
Licensed Practical Nurses	0.0
Home Health Aides	0.9
Physical Therapists	1.0
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.3
TOTAL FTEs	10.2

CHN Home Care

270 East Marquette Street
Berlin WI 54923

Green Lake County

(920) 361-5523

License Number: 235

Ownership of Agency: Nonprofit Association

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 31

Number of unduplicated patients in 2000 = 526

COUNTIES SERVED

Adams
Fond du Lac
Green Lake
Marquette
Waupaca
Waushara
Winnebago

TOTAL NUMBER OF ADMISSIONS 503

PERCENT ADMISSIONS FROM:

Private Residences	11.5%
General Hospitals	55.1
Nursing Homes	3.0
Other	30.4

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 513

PERCENT DISCHARGES TO:

Private Residences	66.5%
General Hospitals	16.0
Nursing Homes	2.3
Deaths	2.7
Other	12.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	495	6,610	13.4
Home Health Aide	150	4,475	29.8
Physical Therapy	135	1,055	7.8
Spch/Occ/Resp Therapy	27	130	4.8
Medical Social Service	2	2	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	24	1,205	50.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,477	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 73.5%
4 to 24 2.5	Medicaid 7.7
25 to 54 9.9	Other Federal 0.0
55 to 64 10.3	State Funds 2.2
65 to 74 22.4	Private Insurance 15.5
75 to 84 28.3	Self Pay 1.2
85 & over 25.9	Other 0.0
	TOTAL PATIENTS 599

Males 42.6% Females 57.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.4%	Digestive Disorders 1.5%
Cancer 7.8	Genitourinary Sys. 4.0
Diabetes 5.5	Preg. & Childbirth 0.2
Diseases of Blood 2.9	Arthropathies 7.6
Dementia/Alzheimers 0.8	Osteopathies 0.8
Psychoses/Neuroses 0.6	Perinatal Period 0.4
Central Nervous Sys. 2.3	Ill-Defined Cond. 7.2
Paralysis/CP 0.2	Fractures 6.8
Cardiovascular 19.8	Wounds, Burns 4.8
Stroke 3.6	Compl. of Surgery 1.7
Respiratory 5.5	Other Conditions 15.8

REVENUE

Billings	\$ 1,270,805
Disallowances	263,577
Collections	1,007,228
Other	61,497
Total	1,068,725

EXPENSES

Total	\$ 1,240,886
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	4.7
Licensed Practical Nurses	0.0
Home Health Aides	4.2
Physical Therapists	0.9
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.3
TOTAL FTEs	13.6

Allied Home Care

825 South Iowa Street-Tower West Building
Dodgeville WI 53533 Iowa County

(608) 935-9404

License Number: 60

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 39

Number of unduplicated patients in 2000 = 451

COUNTIES SERVED

Dane
Grant
Iowa
LaFayette
Richland
Sauk

TOTAL NUMBER OF ADMISSIONS 441

PERCENT ADMISSIONS FROM:

Private Residences	28.8%
General Hospitals	48.3
Nursing Homes	16.6
Other	6.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 442

PERCENT DISCHARGES TO:

Private Residences	70.1%
General Hospitals	8.1
Nursing Homes	6.3
Deaths	2.7
Other	12.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	379	3,628	9.6
Home Health Aide	132	3,155	23.9
Physical Therapy	187	1,237	6.6
Spch/Occ/Resp Therapy	62	192	3.1
Medical Social Service	7	8	1.1
Private Duty Nursing	2	342	171.0
Personal Care/PC RN Supv.	112	6,804	60.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	15,366	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.0%	Medicare 65.8%
4 to 24 0.9	Medicaid 9.2
25 to 54 10.6	Other Federal 0.2
55 to 64 10.9	State Funds 0.0
65 to 74 20.2	Private Insurance 16.6
75 to 84 31.5	Self Pay 7.6
85 & over 23.9	Other 0.6
	TOTAL PATIENTS 489

Males 40.6% Females 59.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.6%	Digestive Disorders 1.6%
Cancer 6.7	Genitourinary Sys. 2.0
Diabetes 2.7	Preg. & Childbirth 0.2
Diseases of Blood 1.3	Arthropathies 12.4
Dementia/Alzheimers 0.7	Osteopathies 2.7
Psychoses/Neuroses 0.0	Perinatal Period 1.3
Central Nervous Sys. 4.7	Ill-Defined Cond. 5.5
Paralysis/CP 0.4	Fractures 9.8
Cardiovascular 15.3	Wounds, Burns 7.3
Stroke 3.5	Compl. of Surgery 0.7
Respiratory 11.1	Other Conditions 8.6

REVENUE

Billings	\$ 1,052,098
Disallowances	119,342
Collections	932,756
Other	2,120
Total	934,876

EXPENSES

Total	\$ 1,034,346
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.9
Licensed Practical Nurses	1.8
Home Health Aides	2.8
Physical Therapists	0.8
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.7
Homemakers	0.0
Other Staff	2.8
TOTAL FTEs	18.9

Pine View Home Health

601 West Adams, PO Box 273

Black River Falls WI 54615

Jackson County

COUNTIES SERVED

Jackson

(715) 284-9495

License Number: 219

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 40

Number of unduplicated patients in 2000 = 238

TOTAL NUMBER OF ADMISSIONS 181**PERCENT ADMISSIONS FROM:**

Private Residences 44.8%

General Hospitals 39.8

Nursing Homes 14.9

Other 0.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 165

PERCENT DISCHARGES TO:

Private Residences 49.7%

General Hospitals 35.2

Nursing Homes 6.7

Deaths 7.3

Other 1.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	191	2,554	13.4
Home Health Aide	68	3,021	44.4
Physical Therapy	39	561	14.4
Spch/Occ/Resp Therapy	14	62	4.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	84	8,321	99.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,519	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 47.9%
4 to 24 1.3	Medicaid 32.4
25 to 54 10.5	Other Federal 0.4
55 to 64 8.8	State Funds 2.9
65 to 74 19.3	Private Insurance 7.6
75 to 84 35.7	Self Pay 8.8
85 & over 24.4	Other 0.0
	TOTAL PATIENTS 238

Males 38.2% Females 61.8 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS		PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%		Digestive Disorders 0.8%	
Cancer 10.1		Genitourinary Sys. 3.8	
Diabetes 11.3		Preg. & Childbirth 0.0	
Diseases of Blood 2.1		Arthropathies 5.5	
Dementia/Alzheimers 4.6		Osteopathies 5.0	
Psychoses/Neuroses 0.0		Perinatal Period 0.0	
Central Nervous Sys. 5.0		Ill-Defined Cond. 5.5	
Paralysis/CP 3.8		Fractures 2.9	
Cardiovascular 16.8		Wounds, Burns 2.9	
Stroke 5.9		Compl. of Surgery 0.0	
Respiratory 5.5		Other Conditions 8.4	

REVENUE

Billings \$	688,495
Disallowances	136,203
Collections	552,292
Other	0
Total	552,292

EXPENSES

Total \$	978,460
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.7
Licensed Practical Nurses	0.0
Home Health Aides	5.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	6.0
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	24.5

Fort Atkinson Memorial Hlth. Service Home Health Agency

426 McMillen Street

Fort Atkinson WI 53538

Jefferson County

(920) 568-6500

COUNTIES SERVED

Dane

Jefferson

Rock

Walworth

License Number: 137

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 30

Number of unduplicated patients in 2000 = 373

TOTAL NUMBER OF ADMISSIONS 393**PERCENT ADMISSIONS FROM:**

Private Residences 27.7%

General Hospitals 61.3

Nursing Homes 6.6

Other 4.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 396

PERCENT DISCHARGES TO:

Private Residences 78.3%

General Hospitals 14.4

Nursing Homes 1.0

Deaths 0.8

Other 5.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	360	3,501	9.7
Home Health Aide	91	7,929	87.1
Physical Therapy	122	713	5.8
Spch/Occ/Resp Therapy	39	156	4.0
Medical Social Service	32	70	2.2
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,369	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.6%	Medicare 61.3%
4 to 24 2.1	Medicaid 13.4
25 to 54 17.7	Other Federal 0.3
55 to 64 9.9	State Funds 0.0
65 to 74 22.0	Private Insurance 21.3
75 to 84 19.0	Self Pay 1.3
85 & over 23.6	Other 2.4
	TOTAL PATIENTS 380

Males 43.7% Females 56.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 3.5%
Cancer 6.2	Genitourinary Sys. 3.2
Diabetes 5.4	Preg. & Childbirth 0.3
Diseases of Blood 0.5	Arthropathies 10.2
Dementia/Alzheimers 0.3	Osteopathies 0.8
Psychoses/Neuroses 1.6	Perinatal Period 5.4
Central Nervous Sys. 4.3	Ill-Defined Cond. 9.4
Paralysis/CP 0.3	Fractures 3.5
Cardiovascular 9.9	Wounds, Burns 18.8
Stroke 2.4	Compl. of Surgery 0.3
Respiratory 6.2	Other Conditions 7.8

REVENUE

Billings \$	808,292
Disallowances	314,720
Collections	493,572
Other	0
Total	493,572

EXPENSES

Total \$	624,031
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	1.0
Registered Nurses	4.8
Licensed Practical Nurses	0.0
Home Health Aides	5.0
Physical Therapists	0.8
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.7
TOTAL FTEs	13.6

Jefferson County Health Department

N3995 Annex Road
Jefferson WI 53549

Jefferson County

COUNTIES SERVED

Jefferson

(920) 674-7275

License Number: 63

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 120

TOTAL NUMBER OF ADMISSIONS 105**PERCENT ADMISSIONS FROM:**

Private Residences	26.7%
General Hospitals	61.9
Nursing Homes	8.6
Other	2.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	120	1,544	12.9
Home Health Aide	60	2,824	47.1
Physical Therapy	46	384	8.3
Spch/Occ/Resp Therapy	13	35	2.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,787	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 113

PERCENT DISCHARGES TO:

Private Residences	51.3%
General Hospitals	32.7
Nursing Homes	5.3
Deaths	0.0
Other	10.6

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 48.4%
4 to 24 0.8	Medicaid 37.9
25 to 54 16.7	Other Federal 2.5
55 to 64 7.5	State Funds 0.0
65 to 74 20.0	Private Insurance 7.5
75 to 84 25.0	Self Pay 3.7
85 & over 30.0	Other 0.0
	TOTAL PATIENTS 161

Males 37.5% Females 62.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.8%	Digestive Disorders 1.7%
Cancer 1.7	Genitourinary Sys. 5.8
Diabetes 4.2	Preg. & Childbirth 0.0
Diseases of Blood 6.7	Arthropathies 10.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 5.0	Ill-Defined Cond. 5.0
Paralysis/CP 6.7	Fractures 6.7
Cardiovascular 23.3	Wounds, Burns 5.0
Stroke 3.3	Compl. of Surgery 0.8
Respiratory 10.0	Other Conditions 3.3

REVENUE

Billings \$	416,781
Disallowances	123,281
Collections	293,500
Other	0
Total	293,500

EXPENSES

Total \$	589,160
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	0.5
Registered Nurses	1.4
Licensed Practical Nurses	0.7
Home Health Aides	2.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	6.6

KJM Home Health Care Agency

111 North Third Street
Watertown WI 53094

Jefferson County

(920) 262-0952

COUNTIES SERVED

Dodge
Green Lake
Jefferson
Waukesha

License Number: 135

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 3

Number of unduplicated patients in 2000 = 46

TOTAL NUMBER OF ADMISSIONS 19

PERCENT ADMISSIONS FROM:

Private Residences	21.1%
General Hospitals	57.9
Nursing Homes	0.0
Other	21.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	46	736	16.0
Home Health Aide	15	1,478	98.5
Physical Therapy	3	15	5.0
Spch/Occ/Resp Therapy	2	2	1.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	3	218	72.7
TOTAL	XXXXXXX	2,449	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 47

PERCENT DISCHARGES TO:

Private Residences	19.1%
General Hospitals	23.4
Nursing Homes	4.3
Deaths	2.1
Other	51.1

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 45.7%
4 to 24 0.0	Medicaid 10.9
25 to 54 34.8	Other Federal 0.0
55 to 64 19.6	State Funds 0.0
65 to 74 17.4	Private Insurance 15.2
75 to 84 19.6	Self Pay 28.3
85 & over 6.5	Other 0.0
	TOTAL PATIENTS 46

Males 54.3% Females 45.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 4.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 2.2	Osteopathies 0.0
Psychoses/Neuroses 2.2	Perinatal Period 2.2
Central Nervous Sys. 0.0	Ill-Defined Cond. 4.3
Paralysis/CP 6.5	Fractures 2.2
Cardiovascular 10.9	Wounds, Burns 8.7
Stroke 2.2	Compl. of Surgery 0.0
Respiratory 4.3	Other Conditions 50.0

REVENUE

Billings \$	272,553
Disallowances	54,497
Collections	218,056
Other	0
Total	218,056

EXPENSES

Total \$	271,531
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.4
Licensed Practical Nurses	0.7
Home Health Aides	0.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.1
Other Staff	1.0
TOTAL FTEs	6.8

Hess Home Health
1050 Division Street
Mauston WI 53948

Juneau County

(608) 847-6017

COUNTIES SERVED

Adams
Juneau
Monroe
Sauk

License Number: 216
Ownership of Agency: Nonprofit Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 14
Number of unduplicated patients in 2000 = 203

TOTAL NUMBER OF ADMISSIONS 213

PERCENT ADMISSIONS FROM:

Private Residences	12.2%
General Hospitals	77.0
Nursing Homes	10.3
Other	0.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	191	2,581	13.5
Home Health Aide	78	1,945	24.9
Physical Therapy	38	237	6.2
Spch/Occ/Resp Therapy	8	48	6.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,811	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 216

PERCENT DISCHARGES TO:

Private Residences	72.2%
General Hospitals	23.1
Nursing Homes	2.3
Deaths	0.0
Other	2.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 83.0%
4 to 24 0.0	Medicaid 3.8
25 to 54 7.9	Other Federal 0.5
55 to 64 8.4	State Funds 0.0
65 to 74 21.7	Private Insurance 10.8
75 to 84 38.4	Self Pay 1.9
85 & over 23.2	Other 0.0
	TOTAL PATIENTS 212

Males 34.5% Females 65.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 4.4%
Cancer 6.4	Genitourinary Sys. 2.0
Diabetes 9.4	Preg. & Childbirth 0.0
Diseases of Blood 0.5	Arthropathies 8.4
Dementia/Alzheimers 0.0	Osteopathies 1.5
Psychoses/Neuroses 0.5	Perinatal Period 0.5
Central Nervous Sys. 0.5	Ill-Defined Cond. 5.9
Paralysis/CP 0.0	Fractures 8.9
Cardiovascular 22.7	Wounds, Burns 2.5
Stroke 5.9	Compl. of Surgery 2.5
Respiratory 8.9	Other Conditions 7.9

REVENUE

Billings \$	416,739
Disallowances	6,859
Collections	409,880
Other	0
Total	409,880

EXPENSES

Total \$	459,501
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.1
Licensed Practical Nurses	0.0
Home Health Aides	1.6
Physical Therapists	0.3
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	7.0

Alliance Home Care

600 52nd Street, Suite 300
Kenosha WI 53140

Kenosha County

COUNTIES SERVED

Kenosha
Racine

(262) 652-4400

License Number: 130

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 5

Number of unduplicated patients in 2000 = 64

TOTAL NUMBER OF ADMISSIONS 68

PERCENT ADMISSIONS FROM:

Private Residences	39.7%
General Hospitals	60.3
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	64	547	8.5
Home Health Aide	52	269	5.2
Physical Therapy	3	19	6.3
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	17	41	2.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	13	47	3.6
TOTAL	XXXXXXX	923	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 71

PERCENT DISCHARGES TO:

Private Residences	46.5%
General Hospitals	5.6
Nursing Homes	0.0
Deaths	8.5
Other	39.4

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 75.0%
4 to 24 0.0	Medicaid 10.9
25 to 54 6.3	Other Federal 0.0
55 to 64 15.6	State Funds 0.0
65 to 74 26.6	Private Insurance 10.9
75 to 84 37.5	Self Pay 3.1
85 & over 14.1	Other 0.0
	TOTAL PATIENTS 64

Males 42.2% Females 57.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 67.2	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 1.6	Arthropathies 0.0
Dementia/Alzheimers 4.7	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 9.4	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 15.6	Other Conditions 1.6

REVENUE

Billings \$	85,233
Disallowances	15,178
Collections	70,055
Other	3,978
Total	74,033

EXPENSES

Total \$	183,516
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	2.1
Licensed Practical Nurses	0.0
Home Health Aides	1.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.3
Other Therapeutic Staff	0.5
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	6.3

Kenosha VNA, Inc.

600 52nd Street, Suite 300
Kenosha WI 53140

Kenosha County

(262) 656-8400

COUNTIES SERVED

Kenosha
Racine
Walworth

License Number: 65
Ownership of Agency: Nonprofit Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = .
Number of unduplicated patients in 2000 = 949

TOTAL NUMBER OF ADMISSIONS 949

PERCENT ADMISSIONS FROM:

Private Residences	23.0%
General Hospitals	65.4
Nursing Homes	11.1
Other	0.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	858	9,911	11.6
Home Health Aide	233	6,368	27.3
Physical Therapy	290	3,130	10.8
Spch/Occ/Resp Therapy	47	370	7.9
Medical Social Service	36	59	1.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	19,838	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 966

PERCENT DISCHARGES TO:

Private Residences	75.8%
General Hospitals	14.1
Nursing Homes	5.5
Deaths	0.9
Other	3.7

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 80.3%
4 to 24 0.2	Medicaid 4.5
25 to 54 32.9	Other Federal 0.0
55 to 64 27.7	State Funds 0.0
65 to 74 11.9	Private Insurance 14.8
75 to 84 14.6	Self Pay 0.4
85 & over 12.1	Other 0.0
	TOTAL PATIENTS 949

Males 61.1% Females 38.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 4.6	Genitourinary Sys. 1.7
Diabetes 3.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 6.7
Dementia/Alzheimers 0.6	Osteopathies 1.6
Psychoses/Neuroses 0.3	Perinatal Period 0.0
Central Nervous Sys. 0.6	Ill-Defined Cond. 0.0
Paralysis/CP 0.9	Fractures 5.8
Cardiovascular 18.5	Wounds, Burns 3.0
Stroke 3.6	Compl. of Surgery 1.8
Respiratory 9.1	Other Conditions 37.5

REVENUE

Billings	\$ 2,123,056
Disallowances	206,787
Collections	1,916,269
Other	265,152
Total	2,181,421

EXPENSES

Total	\$ 2,106,528
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	1.8
Registered Nurses	11.5
Licensed Practical Nurses	0.5
Home Health Aides	4.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	7.3
TOTAL FTEs	25.1

Franciscan Skemp Medical Center HHS

212 South 11th Street

La Crosse WI 54601

La Crosse County

(608) 791-9790

COUNTIES SERVED

Jackson

LaCrosse

Monroe

Vernon

License Number: 141

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 31

Number of unduplicated patients in 2000 = 344

TOTAL NUMBER OF ADMISSIONS 321**PERCENT ADMISSIONS FROM:**

Private Residences 5.3%

General Hospitals 51.1

Nursing Homes 15.6

Other 28.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 321

PERCENT DISCHARGES TO:

Private Residences 76.3%

General Hospitals 0.0

Nursing Homes 11.8

Deaths 10.0

Other 1.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	299	4,078	13.6
Home Health Aide	307	6,618	21.6
Physical Therapy	135	1,221	9.0
Spch/Occ/Resp Therapy	43	214	5.0
Medical Social Service	12	23	1.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,154	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 73.2%
4 to 24 3.2	Medicaid 11.0
25 to 54 19.8	Other Federal 0.0
55 to 64 6.4	State Funds 0.0
65 to 74 19.2	Private Insurance 14.5
75 to 84 27.0	Self Pay 0.5
85 & over 23.8	Other 0.8
	TOTAL PATIENTS 399

Males 35.5% Females 64.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.6%	Digestive Disorders 4.4%
Cancer 15.7	Genitourinary Sys. 2.3
Diabetes 3.5	Preg. & Childbirth 0.9
Diseases of Blood 2.6	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 2.3	Fractures 13.4
Cardiovascular 18.0	Wounds, Burns 16.9
Stroke 3.2	Compl. of Surgery 4.7
Respiratory 6.7	Other Conditions 4.9

REVENUE

Billings \$	949,315
Disallowances	341,221
Collections	608,094
Other	0
Total	608,094

EXPENSES

Total \$	1,007,963
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	5.6
Licensed Practical Nurses	0.0
Home Health Aides	6.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.3
TOTAL FTEs	18.5

Gundersen Lutheran Visiting Nurse, Inc.

811 Monitor Street, Suite 101

La Crosse WI 54603

La Crosse County

(608) 791-8400

License Number: 67

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 98

Number of unduplicated patients in 2000 = 584

COUNTIES SERVED

Buffalo

Crawford

Jackson

Juneau

LaCrosse

Monroe

Trempealeau

Vernon

TOTAL NUMBER OF ADMISSIONS 576**PERCENT ADMISSIONS FROM:**

Private Residences 8.9%

General Hospitals 78.5

Nursing Homes 7.3

Other 5.4

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 544

PERCENT DISCHARGES TO:

Private Residences 66.7%

General Hospitals 20.2

Nursing Homes 3.5

Deaths 0.4

Other 9.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	584	6,294	10.8
Home Health Aide	192	25,461	132.6
Physical Therapy	159	778	4.9
Spch/Occ/Resp Therapy	63	179	2.8
Medical Social Service	31	53	1.7
Private Duty Nursing	19	4,704	247.6
Personal Care/PC RN Supv.	66	5,114	77.5
Other Home Health Care	8	12	1.5
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	42,595	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.0%	Medicare 67.4%
4 to 24 11.1	Medicaid 28.5
25 to 54 15.1	Other Federal 0.0
55 to 64 10.4	State Funds 0.8
65 to 74 18.0	Private Insurance 0.0
75 to 84 24.8	Self Pay 3.2
85 & over 12.5	Other 0.0
	TOTAL PATIENTS 897

Males 42.6% Females 57.4 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	3.1%
Cancer	8.9	Genitourinary Sys.	3.3
Diabetes	1.7	Preg. & Childbirth	0.2
Diseases of Blood	0.3	Arthropathies	9.1
Dementia/Alzheimers	0.5	Osteopathies	2.7
Psychoses/Neuroses	1.4	Perinatal Period	4.5
Central Nervous Sys.	3.4	Ill-Defined Cond.	4.6
Paralysis/CP	4.6	Fractures	4.1
Cardiovascular	17.1	Wounds, Burns	3.9
Stroke	3.6	Compl. of Surgery	3.9
Respiratory	3.6	Other Conditions	15.4

REVENUE

Billings	\$	3,961,167
Disallowances		983,562
Collections		2,977,605
Other		0
Total		2,977,605

EXPENSES

Total	\$	3,212,441
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	16.4
Licensed Practical Nurses	14.4
Home Health Aides	26.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTEs	57.5

La Crosse County Health Department

300 4th Street North

La Crosse WI 54601

La Crosse County

COUNTIES SERVED

LaCrosse

(608) 785-9823

License Number: 66

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 28

Number of unduplicated patients in 2000 = 151

TOTAL NUMBER OF ADMISSIONS 83**PERCENT ADMISSIONS FROM:**

Private Residences	13.3%
General Hospitals	19.3
Nursing Homes	8.4
Other	59.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 129

PERCENT DISCHARGES TO:

Private Residences	39.5%
General Hospitals	14.0
Nursing Homes	20.2
Deaths	8.5
Other	17.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	151	3,032	20.1
Home Health Aide	103	7,422	72.1
Physical Therapy	30	174	5.8
Spch/Occ/Resp Therapy	9	31	3.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	274	19,310	70.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	29,969	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 17.5%
4 to 24 0.7	Medicaid 64.6
25 to 54 15.9	Other Federal 0.0
55 to 64 12.6	State Funds 0.0
65 to 74 16.6	Private Insurance 8.3
75 to 84 23.2	Self Pay 9.6
85 & over 29.8	Other 0.0
	TOTAL PATIENTS 302

Males 32.5% Females 67.5 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	4.6%
Cancer	4.0	Genitourinary Sys.	4.6
Diabetes	6.6	Preg. & Childbirth	0.0
Diseases of Blood	2.6	Arthropathies	3.3
Dementia/Alzheimers	0.0	Osteopathies	2.6
Psychoses/Neuroses	4.6	Perinatal Period	0.0
Central Nervous Sys.	5.3	Ill-Defined Cond.	9.3
Paralysis/CP	2.6	Fractures	4.6
Cardiovascular	21.9	Wounds, Burns	0.7
Stroke	2.0	Compl. of Surgery	0.7
Respiratory	4.6	Other Conditions	15.2

REVENUE

Billings	\$ 1,243,124
Disallowances	206,972
Collections	1,036,152
Other	40,442
Total	1,076,594

EXPENSES

Total	\$ 1,335,906
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	5.7
Licensed Practical Nurses	0.0
Home Health Aides	5.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	8.1
Homemakers	0.0
Other Staff	5.7
TOTAL FTEs	26.5

Lafayette County Nursing Agency

729 Clay Street, PO Box 118

Darlington WI 53530

Lafayette County

COUNTIES SERVED

LaFayette

(608) 776-4895

License Number: 68

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 6

Number of unduplicated patients in 2000 = 141

TOTAL NUMBER OF ADMISSIONS 100**PERCENT ADMISSIONS FROM:**

Private Residences 57.0%

General Hospitals 32.0

Nursing Homes 11.0

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 114

PERCENT DISCHARGES TO:

Private Residences 58.8%

General Hospitals 11.4

Nursing Homes 14.0

Deaths 5.3

Other 10.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	134	2,939	21.9
Home Health Aide	32	1,149	35.9
Physical Therapy	28	132	4.7
Spch/Occ/Resp Therapy	2	2	1.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	42	780	18.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,002	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 69.2%
4 to 24 1.4	Medicaid 15.4
25 to 54 7.8	Other Federal 0.7
55 to 64 7.1	State Funds 0.0
65 to 74 23.4	Private Insurance 9.1
75 to 84 27.0	Self Pay 5.6
85 & over 33.3	Other 0.0
	TOTAL PATIENTS 143

Males 42.6% Females 57.4 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS	PERCENT	SECONDARY DIAGNOSIS	PERCENT
Infectious Disorders	2.1%	Digestive Disorders	2.1%
Cancer	2.8	Genitourinary Sys.	0.7
Diabetes	8.5	Preg. & Childbirth	0.0
Diseases of Blood	6.4	Arthropathies	9.2
Dementia/Alzheimers	0.0	Osteopathies	0.0
Psychoses/Neuroses	0.7	Perinatal Period	0.0
Central Nervous Sys.	1.4	Ill-Defined Cond.	2.8
Paralysis/CP	0.7	Fractures	2.1
Cardiovascular	29.1	Wounds, Burns	6.4
Stroke	0.7	Compl. of Surgery	4.3
Respiratory	8.5	Other Conditions	11.3

REVENUE

Billings	\$	330,783
Disallowances		75,301
Collections		255,482
Other		4,235
Total		259,717

EXPENSES

Total	\$	380,629
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	3.5
Licensed Practical Nurses	0.0
Home Health Aides	2.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTEs	9.4

Langlade County Health Department

1225 Langlade Road

Antigo WI 54409

Langlade County

COUNTIES SERVED

Langlade

(715) 627-6250

License Number: 69

Ownership of Agency: County

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 190

TOTAL NUMBER OF ADMISSIONS 137**PERCENT ADMISSIONS FROM:**

Private Residences 22.6%

General Hospitals 38.7

Nursing Homes 20.4

Other 18.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	86	928	10.8
Home Health Aide	28	504	18.0
Physical Therapy	43	247	5.7
Spch/Occ/Resp Therapy	16	71	4.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	216	18,376	85.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	20,126	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 164

PERCENT DISCHARGES TO:

Private Residences 57.9%

General Hospitals 27.4

Nursing Homes 9.1

Deaths 0.6

Other 4.9

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 35.1%
4 to 24 1.1	Medicaid 48.5
25 to 54 11.6	Other Federal 0.0
55 to 64 7.9	State Funds 0.0
65 to 74 15.3	Private Insurance 4.0
75 to 84 29.5	Self Pay 12.4
85 & over 34.2	Other 0.0
	TOTAL PATIENTS 202

Males 34.7% Females 65.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.5%
Cancer 2.1	Genitourinary Sys. 3.2
Diabetes 4.2	Preg. & Childbirth 0.0
Diseases of Blood 1.6	Arthropathies 10.0
Dementia/Alzheimers 1.6	Osteopathies 0.0
Psychoses/Neuroses 0.5	Perinatal Period 0.5
Central Nervous Sys. 4.2	Ill-Defined Cond. 17.9
Paralysis/CP 1.1	Fractures 3.7
Cardiovascular 8.4	Wounds, Burns 2.1
Stroke 4.7	Compl. of Surgery 2.1
Respiratory 3.7	Other Conditions 27.9

REVENUE

Billings \$	584,330
Disallowances	117,441
Collections	466,889
Other	0
Total	466,889

EXPENSES

Total \$	790,013
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STAFFING**FTEs**

Administrators	2.0
Reg. Nurse Supervisors	0.0
Registered Nurses	6.5
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.9
Homemakers	0.0
Other Staff	3.0
TOTAL FTEs	15.4

Holy Family Memorial Home Care

333 Reed Avenue, PO Box 1450

Manitowoc WI 54220

Manitowoc County

COUNTIES SERVED

Manitowoc

(920) 683-8441

License Number: 143

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 56

Number of unduplicated patients in 2000 = 475

TOTAL NUMBER OF ADMISSIONS 479**PERCENT ADMISSIONS FROM:**

Private Residences	22.8%
General Hospitals	66.6
Nursing Homes	9.0
Other	1.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 476

PERCENT DISCHARGES TO:

Private Residences	67.0%
General Hospitals	19.1
Nursing Homes	3.6
Deaths	1.7
Other	8.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	425	7,732	18.2
Home Health Aide	345	9,795	28.4
Physical Therapy	95	942	9.9
Spch/Occ/Resp Therapy	38	291	7.7
Medical Social Service	7	8	1.1
Private Duty Nursing	2	671	335.5
Personal Care/PC RN Supv.	96	5,480	57.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	24,919	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.1%	Medicare 67.8%
4 to 24 6.9	Medicaid 16.9
25 to 54 12.8	Other Federal 0.5
55 to 64 7.6	State Funds 0.3
65 to 74 16.4	Private Insurance 13.6
75 to 84 33.3	Self Pay 0.7
85 & over 21.9	Other 0.2
	TOTAL PATIENTS 587

Males 40.8% Females 59.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.5%	Digestive Disorders 4.2%
Cancer 7.6	Genitourinary Sys. 4.2
Diabetes 3.4	Preg. & Childbirth 0.4
Diseases of Blood 0.8	Arthropathies 9.9
Dementia/Alzheimers 0.2	Osteopathies 0.4
Psychoses/Neuroses 1.3	Perinatal Period 0.6
Central Nervous Sys. 2.3	Ill-Defined Cond. 9.1
Paralysis/CP 1.7	Fractures 3.6
Cardiovascular 21.7	Wounds, Burns 2.7
Stroke 2.7	Compl. of Surgery 3.8
Respiratory 7.4	Other Conditions 10.5

REVENUE

Billings	\$ 1,624,110
Disallowances	341,732
Collections	1,282,378
Other	50
Total	1,282,428

EXPENSES

Total	\$ 1,861,218
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	9.9
Licensed Practical Nurses	0.5
Home Health Aides	20.9
Physical Therapists	0.8
Occupational Therapists	0.5
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.3
Homemakers	0.0
Other Staff	3.0
TOTAL FTEs	43.8

Homecare Health Service, Inc.

1004 Washington Street
Manitowoc WI 54220

Manitowoc County

COUNTIES SERVED

Manitowoc

(920) 684-7155

License Number: 1

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 14

Number of unduplicated patients in 2000 = 84

TOTAL NUMBER OF ADMISSIONS 87

PERCENT ADMISSIONS FROM:

Private Residences	52.9%
General Hospitals	6.9
Nursing Homes	2.3
Other	37.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 80

PERCENT DISCHARGES TO:

Private Residences	70.0%
General Hospitals	18.8
Nursing Homes	2.5
Deaths	1.3
Other	7.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	74	826	11.2
Home Health Aide	38	495	13.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	48	2,146	44.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,467	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.4%	Medicare 60.7%
4 to 24 6.0	Medicaid 29.8
25 to 54 8.3	Other Federal 0.0
55 to 64 2.4	State Funds 3.6
65 to 74 20.2	Private Insurance 4.8
75 to 84 31.0	Self Pay 1.2
85 & over 29.8	Other 0.0
	TOTAL PATIENTS 84

Males 33.3% Females 66.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.2%	Digestive Disorders 2.4%
Cancer 1.2	Genitourinary Sys. 6.0
Diabetes 7.1	Preg. & Childbirth 0.0
Diseases of Blood 1.2	Arthropathies 6.0
Dementia/Alzheimers 2.4	Osteopathies 1.2
Psychoses/Neuroses 2.4	Perinatal Period 0.0
Central Nervous Sys. 3.6	Ill-Defined Cond. 3.6
Paralysis/CP 4.8	Fractures 2.4
Cardiovascular 23.8	Wounds, Burns 1.2
Stroke 3.6	Compl. of Surgery 1.2
Respiratory 11.9	Other Conditions 13.1

REVENUE

Billings \$	213,348
Disallowances	55,497
Collections	157,851
Other	0
Total	157,851

EXPENSES

Total \$	157,575
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	0.2
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.3
Homemakers	0.0
Other Staff	0.7
TOTAL FTEs	4.0

Interim Healthcare

2402 Grand Avenue

Wausau WI 54403

Marathon County

(715) 842-7707

COUNTIES SERVED

Lincoln
Marathon
Portage
Shawano
Wood

License Number: 277

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 121

TOTAL NUMBER OF ADMISSIONS 109**PERCENT ADMISSIONS FROM:**

Private Residences	15.6%
General Hospitals	73.4
Nursing Homes	6.4
Other	4.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 113

PERCENT DISCHARGES TO:

Private Residences	77.9%
General Hospitals	15.0
Nursing Homes	1.8
Deaths	4.4
Other	0.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	119	1,563	13.1
Home Health Aide	43	3,665	85.2
Physical Therapy	65	501	7.7
Spch/Occ/Resp Therapy	12	27	2.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	16	2,305	144.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,061	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 56.3%
4 to 24 3.3	Medicaid 17.5
25 to 54 25.6	Other Federal 0.0
55 to 64 9.1	State Funds 0.0
65 to 74 16.5	Private Insurance 23.8
75 to 84 25.6	Self Pay 2.4
85 & over 19.8	Other 0.0
	TOTAL PATIENTS 126

Males 46.3% Females 53.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.7%	Digestive Disorders 7.4%
Cancer 5.0	Genitourinary Sys. 2.5
Diabetes 1.7	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 16.5
Dementia/Alzheimers 0.8	Osteopathies 0.8
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 9.9	Ill-Defined Cond. 9.9
Paralysis/CP 0.8	Fractures 6.6
Cardiovascular 15.7	Wounds, Burns 2.5
Stroke 2.5	Compl. of Surgery 5.0
Respiratory 1.7	Other Conditions 7.4

REVENUE

Billings \$	533,357
Disallowances	13,171
Collections	520,186
Other	0
Total	520,186

EXPENSES

Total \$	560,077
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	0.7
Licensed Practical Nurses	0.0
Home Health Aides	2.5
Physical Therapists	0.4
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.5
Homemakers	0.0
Other Staff	2.4
TOTAL FTEs	9.2

VNA Home Health, Inc.

520 North 32nd Avenue

Wausau WI 54401

Marathon County

(715) 847-2600

License Number: 73

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 208

Number of unduplicated patients in 2000 = 1,811

COUNTIES SERVED

Clark

Forest

Langlade

Lincoln

Marathon

Oconto

Oneida

Portage

Price

Shawano

Taylor

Vilas

Wood

TOTAL NUMBER OF ADMISSIONS 1,827**PERCENT ADMISSIONS FROM:**

Private Residences 34.2%

General Hospitals 54.6

Nursing Homes 10.5

Other 0.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,709

PERCENT DISCHARGES TO:

Private Residences 68.3%

General Hospitals 20.5

Nursing Homes 2.2

Deaths 1.5

Other 7.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,350	25,261	18.7
Home Health Aide	436	38,657	88.7
Physical Therapy	564	2,476	4.4
Spch/Occ/Resp Therapy	217	1,028	4.7
Medical Social Service	6	7	1.2
Private Duty Nursing	12	1,026	85.5
Personal Care/PC RN Supv.	412	17,854	43.3
Other Home Health Care	10	115	11.5
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	86,424	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.1%	Medicare 61.3%
4 to 24 2.9	Medicaid 16.2
25 to 54 14.1	Other Federal 0.0
55 to 64 9.9	State Funds 0.3
65 to 74 18.9	Private Insurance 19.2
75 to 84 30.4	Self Pay 3.0
85 & over 18.6	Other 0.0
	TOTAL PATIENTS 1,860

Males 40.9% Females 59.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.8%	Digestive Disorders 1.2%
Cancer 5.9	Genitourinary Sys. 2.6
Diabetes 4.4	Preg. & Childbirth 0.4
Diseases of Blood 0.3	Arthropathies 8.1
Dementia/Alzheimers 1.6	Osteopathies 1.8
Psychoses/Neuroses 0.5	Perinatal Period 0.3
Central Nervous Sys. 3.6	Ill-Defined Cond. 12.5
Paralysis/CP 2.4	Fractures 8.2
Cardiovascular 14.8	Wounds, Burns 8.0
Stroke 2.5	Compl. of Surgery 2.5
Respiratory 5.4	Other Conditions 11.4

REVENUE

Billings	\$ 6,530,863
Disallowances	1,663,741
Collections	4,867,122
Other	47,246
Total	4,914,368

EXPENSES

Total	\$ 5,040,596
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	29.8
Licensed Practical Nurses	0.4
Home Health Aides	31.6
Physical Therapists	2.8
Occupational Therapists	1.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	9.6
Homemakers	0.0
Other Staff	18.7
TOTAL FTEs	95.9

Caregivers Home Health

3900 Hall Avenue, Suite A
Marinette WI 54143

Marinette County

COUNTIES SERVED

Marinette

(920) 233-2081

License Number: 1005

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 26

Number of unduplicated patients in 2000 = 100

TOTAL NUMBER OF ADMISSIONS 97

PERCENT ADMISSIONS FROM:

Private Residences	48.5%
General Hospitals	40.2
Nursing Homes	7.2
Other	4.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 74

PERCENT DISCHARGES TO:

Private Residences	47.3%
General Hospitals	31.1
Nursing Homes	14.9
Deaths	2.7
Other	4.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	40	1,530	38.3
Home Health Aide	16	5,097	318.6
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	4	538	134.5
Personal Care/PC RN Supv.	72	13,824	192.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	20,989	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.0%	Medicare 2.0%
4 to 24 0.0	Medicaid 73.3
25 to 54 6.0	Other Federal 0.0
55 to 64 10.0	State Funds 0.0
65 to 74 20.0	Private Insurance 14.9
75 to 84 37.0	Self Pay 9.9
85 & over 22.0	Other 0.0
	TOTAL PATIENTS 101

Males 47.0% Females 53.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.0%
Cancer 3.0	Genitourinary Sys. 0.0
Diabetes 24.0	Preg. & Childbirth 1.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 21.0	Osteopathies 0.0
Psychoses/Neuroses 1.0	Perinatal Period 0.0
Central Nervous Sys. 1.0	Ill-Defined Cond. 0.0
Paralysis/CP 9.0	Fractures 0.0
Cardiovascular 2.0	Wounds, Burns 0.0
Stroke 3.0	Compl. of Surgery 0.0
Respiratory 17.0	Other Conditions 16.0

REVENUE

Billings \$	1,166,789
Disallowances	383,768
Collections	783,021
Other	0
Total	783,021

EXPENSES

Total \$	767,462
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	0.4
Licensed Practical Nurses	2.7
Home Health Aides	5.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	20.8
Homemakers	1.1
Other Staff	2.8
TOTAL FTEs	35.6

Northland Lutheran Home Health Service, Inc.
 1105 Northland Terrace Lane
 Marinette WI 54143 Marinette County

COUNTIES SERVED
 Marinette

(715) 735-6222

License Number: 256
 Ownership of Agency: Nonprofit Church
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 18
 Number of unduplicated patients in 2000 = 342

TOTAL NUMBER OF ADMISSIONS 357

PERCENT ADMISSIONS FROM:

Private Residences	6.4%
General Hospitals	64.7
Nursing Homes	10.6
Other	18.2

	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
SERVICES PROVIDED			
Skilled Nursing	341	4,433	13.0
Home Health Aide	102	2,739	26.9
Physical Therapy	40	622	15.6
Spch/Occ/Resp Therapy	2	2	1.0
Medical Social Service	3	3	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	46	217	4.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,016	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 342

PERCENT DISCHARGES TO:

Private Residences	78.1%
General Hospitals	2.0
Nursing Homes	9.4
Deaths	9.1
Other	1.5

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 85.4%
4 to 24 1.8	Medicaid 7.3
25 to 54 8.2	Other Federal 0.5
55 to 64 8.2	State Funds 0.0
65 to 74 19.6	Private Insurance 6.8
75 to 84 33.9	Self Pay 0.0
85 & over 28.4	Other 0.0
	TOTAL PATIENTS 369

Males 43.0% Females 57.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.8%	Digestive Disorders 11.7%
Cancer 13.7	Genitourinary Sys. 5.3
Diabetes 5.6	Preg. & Childbirth 0.6
Diseases of Blood 1.5	Arthropathies 7.3
Dementia/Alzheimers 0.0	Osteopathies 2.3
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.9	Ill-Defined Cond. 7.9
Paralysis/CP 0.0	Fractures 5.8
Cardiovascular 0.0	Wounds, Burns 9.9
Stroke 3.8	Compl. of Surgery 1.5
Respiratory 12.0	Other Conditions 6.4

REVENUE

Billings \$	689,085
Disallowances	97,465
Collections	591,620
Other	7,463
Total	599,083

EXPENSES

Total \$	586,228
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.4
Licensed Practical Nurses	0.0
Home Health Aides	3.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	10.8

Northland Home Health Agency

629 South Charles Street
Westfield WI 53964

Marquette County

(608) 296-3811

COUNTIES SERVED

Adams
Marquette
Waushara

License Number: 241
Ownership of Agency: Proprietary Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 26
Number of unduplicated patients in 2000 = 181

TOTAL NUMBER OF ADMISSIONS 185

PERCENT ADMISSIONS FROM:

Private Residences	52.4%
General Hospitals	33.5
Nursing Homes	8.6
Other	5.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	169	5,449	32.2
Home Health Aide	92	4,921	53.5
Physical Therapy	77	437	5.7
Spch/Occ/Resp Therapy	45	230	5.1
Medical Social Service	16	30	1.9
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	92	3,364	36.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,431	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 190

PERCENT DISCHARGES TO:

Private Residences	64.2%
General Hospitals	21.6
Nursing Homes	3.7
Deaths	3.2
Other	7.4

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 68.6%
4 to 24 2.2	Medicaid 20.1
25 to 54 8.3	Other Federal 0.5
55 to 64 9.4	State Funds 1.5
65 to 74 23.2	Private Insurance 5.2
75 to 84 35.4	Self Pay 4.1
85 & over 21.0	Other 0.0
	TOTAL PATIENTS 194

Males 37.0% Females 63.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 3.9%
Cancer 5.0	Genitourinary Sys. 5.5
Diabetes 9.9	Preg. & Childbirth 0.0
Diseases of Blood 1.1	Arthropathies 9.9
Dementia/Alzheimers 0.0	Osteopathies 2.8
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 4.4	Ill-Defined Cond. 1.7
Paralysis/CP 3.3	Fractures 9.9
Cardiovascular 16.6	Wounds, Burns 6.6
Stroke 5.5	Compl. of Surgery 2.8
Respiratory 7.2	Other Conditions 3.3

REVENUE

Billings \$	829,288
Disallowances	150,665
Collections	678,623
Other	20
Total	678,643

EXPENSES

Total \$	671,853
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STAFFING**FTEs**

Administrators	0.7
Reg. Nurse Supervisors	0.6
Registered Nurses	5.1
Licensed Practical Nurses	0.0
Home Health Aides	3.4
Physical Therapists	0.3
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.7
Homemakers	0.0
Other Staff	2.3
TOTAL FTEs	14.3

Horizon Home Care & Hospice

8949 North Deerbrook Trail

Brown Deer WI 53223

Milwaukee County

(414) 365-8300

License Number: 150

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 317

Number of unduplicated patients in 2000 = 5,935

COUNTIES SERVED

Dodge

Kenosha

Milwaukee

Ozaukee

Racine

Sheboygan

Washington

Waukesha

TOTAL NUMBER OF ADMISSIONS 5,186**PERCENT ADMISSIONS FROM:**

Private Residences 6.4%

General Hospitals 84.2

Nursing Homes 2.2

Other 7.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 5,209

PERCENT DISCHARGES TO:

Private Residences 66.5%

General Hospitals 15.1

Nursing Homes 0.5

Deaths 1.1

Other 16.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2,889	69,934	24.2
Home Health Aide	963	25,295	26.3
Physical Therapy	1,953	16,192	8.3
Spch/Occ/Resp Therapy	599	4,598	7.7
Medical Social Service	329	481	1.5
Private Duty Nursing	238	11,962	50.3
Personal Care/PC RN Supv.	188	8,811	46.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	249	8,851	35.5
TOTAL	XXXXXXX	146,124	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 8.0%	Medicare 52.0%
4 to 24 2.5	Medicaid 6.6
25 to 54 18.8	Other Federal 0.0
55 to 64 11.3	State Funds 0.0
65 to 74 20.3	Private Insurance 33.5
75 to 84 24.7	Self Pay 5.5
85 & over 14.4	Other 2.3
	TOTAL PATIENTS 5,935

Males 41.7% Females 58.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 3.6%
Cancer 14.1	Genitourinary Sys. 2.7
Diabetes 5.3	Preg. & Childbirth 0.5
Diseases of Blood 1.0	Arthropathies 8.9
Dementia/Alzheimers 0.6	Osteopathies 1.2
Psychoses/Neuroses 1.4	Perinatal Period 6.5
Central Nervous Sys. 2.4	Ill-Defined Cond. 5.1
Paralysis/CP 0.7	Fractures 3.6
Cardiovascular 12.2	Wounds, Burns 1.9
Stroke 2.5	Compl. of Surgery 5.1
Respiratory 5.5	Other Conditions 14.8

REVENUE

Billings	\$ 15,682,727
Disallowances	3,793,182
Collections	11,889,545
Other	82,124
Total	11,971,669

EXPENSES

Total	\$ 11,639,464
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	14.5
Registered Nurses	66.2
Licensed Practical Nurses	10.8
Home Health Aides	48.9
Physical Therapists	13.8
Occupational Therapists	3.4
Speech Pathologists	0.5
Respiratory Therapists	0.0
Medical Social Workers	4.9
Other Therapeutic Staff	0.0
Personal Care Workers	3.7
Homemakers	15.3
Other Staff	58.9
TOTAL FTEs	241.9

Amore Home Care, Inc.

7115 West Forest Home Avenue
Greenfield WI 53220

Milwaukee County

COUNTIES SERVED

Milwaukee

(414) 321-3344

License Number: 1014

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 15

TOTAL NUMBER OF ADMISSIONS 15

PERCENT ADMISSIONS FROM:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	15	79	5.3
Home Health Aide	15	304	20.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	30	221	7.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	604	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 3

PERCENT DISCHARGES TO:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 0.0	Medicaid 0.0
25 to 54 6.7	Other Federal 0.0
55 to 64 6.7	State Funds 40.0
65 to 74 33.3	Private Insurance 0.0
75 to 84 46.7	Self Pay 0.0
85 & over 6.7	Other 60.0
	TOTAL PATIENTS 15

Males 20.0% Females 80.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 6.7%
Cancer 0.0	Genitourinary Sys. 6.7
Diabetes 6.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 13.3	Osteopathies 0.0
Psychoses/Neuroses 6.7	Perinatal Period 0.0
Central Nervous Sys. 6.7	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 6.7
Cardiovascular 6.7	Wounds, Burns 6.7
Stroke 6.7	Compl. of Surgery 0.0
Respiratory 6.7	Other Conditions 20.0

REVENUE

Billings \$	5,747
Disallowances	0
Collections	5,747
Other	0
Total	5,747

EXPENSES

Total \$	25,903
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	0.3
Licensed Practical Nurses	0.0
Home Health Aides	1.2
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.6
TOTAL FTEs	4.0

ANS Home Health Services, Inc.

4369 South Howell Avenue, #301

Milwaukee WI 53207

Milwaukee County

COUNTIES SERVED

Milwaukee

Washington

(414) 481-9800

License Number: 306

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 177

Number of unduplicated patients in 2000 = 251

TOTAL NUMBER OF ADMISSIONS 144**PERCENT ADMISSIONS FROM:**

Private Residences 72.9%

General Hospitals 16.7

Nursing Homes 0.7

Other 9.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 92

PERCENT DISCHARGES TO:

Private Residences 52.2%

General Hospitals 30.4

Nursing Homes 0.0

Deaths 7.6

Other 9.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	51	10,078	197.6
Home Health Aide	20	2,373	118.7
Physical Therapy	9	106	11.8
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	450	53,756	119.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	3	263	87.7
TOTAL	XXXXXXX	66,576	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 4.2%
4 to 24 3.6	Medicaid 90.2
25 to 54 14.3	Other Federal 0.7
55 to 64 8.8	State Funds 0.3
65 to 74 23.5	Private Insurance 1.7
75 to 84 32.7	Self Pay 2.8
85 & over 17.1	Other 0.0
	TOTAL PATIENTS 286

Males 35.5% Females 64.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.4%
Cancer 4.4	Genitourinary Sys. 0.8
Diabetes 6.8	Preg. & Childbirth 0.0
Diseases of Blood 1.6	Arthropathies 23.1
Dementia/Alzheimers 4.4	Osteopathies 12.7
Psychoses/Neuroses 1.2	Perinatal Period 0.0
Central Nervous Sys. 5.2	Ill-Defined Cond. 2.8
Paralysis/CP 7.6	Fractures 2.4
Cardiovascular 7.6	Wounds, Burns 6.8
Stroke 6.8	Compl. of Surgery 0.8
Respiratory 2.8	Other Conditions 2.0

REVENUE

Billings	\$ 4,958,661
Disallowances	2,175,942
Collections	2,782,719
Other	0
Total	2,782,719

EXPENSES

Total	\$ 2,643,929
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	4.0
Registered Nurses	10.4
Licensed Practical Nurses	2.1
Home Health Aides	24.7
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	33.3
Homemakers	0.6
Other Staff	7.0
TOTAL FTEs	83.2

Affiliated Home Health Care, Inc.

816 West National Avenue

Milwaukee WI 53204

Milwaukee County

COUNTIES SERVED

Milwaukee

(414) 389-0371

License Number: 326

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 50

Number of unduplicated patients in 2000 = 143

TOTAL NUMBER OF ADMISSIONS 139**PERCENT ADMISSIONS FROM:**

Private Residences 75.5%

General Hospitals 6.5

Nursing Homes 2.9

Other 15.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	97	4,603	47.5
Home Health Aide	10	3,904	390.4
Physical Therapy	5	100	20.0
Spch/Occ/Resp Therapy	2	21	10.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	71	4,459	62.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	1	18	18.0
TOTAL	XXXXXXX	13,105	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 49

PERCENT DISCHARGES TO:

Private Residences 55.1%

General Hospitals 30.6

Nursing Homes 4.1

Deaths 4.1

Other 6.1

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 2.8%
4 to 24 4.2	Medicaid 88.8
25 to 54 37.1	Other Federal 0.0
55 to 64 22.4	State Funds 6.3
65 to 74 16.1	Private Insurance 0.0
75 to 84 13.3	Self Pay 0.7
85 & over 7.0	Other 1.4
	TOTAL PATIENTS 143

Males 33.6% Females 66.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.7%
Cancer 0.0	Genitourinary Sys. 2.8
Diabetes 13.3	Preg. & Childbirth 0.0
Diseases of Blood 0.7	Arthropathies 4.2
Dementia/Alzheimers 2.1	Osteopathies 3.5
Psychoses/Neuroses 35.7	Perinatal Period 0.0
Central Nervous Sys. 6.3	Ill-Defined Cond. 0.0
Paralysis/CP 7.0	Fractures 1.4
Cardiovascular 6.3	Wounds, Burns 3.5
Stroke 3.5	Compl. of Surgery 0.0
Respiratory 4.2	Other Conditions 4.9

REVENUE

Billings	\$ 1,260,130
Disallowances	723,550
Collections	536,580
Other	412
Total	536,992

EXPENSES

Total	\$ 540,148
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 0.0

Registered Nurses 2.7

Licensed Practical Nurses 0.1

Home Health Aides 5.1

Physical Therapists 0.1

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 9.0

Homemakers 0.0

Other Staff 2.2

TOTAL FTEs 20.2

Barry Healthcare Service, Inc.

312 East Wisconsin Avenue

Milwaukee WI 53202

Milwaukee County

(414) 272-9990

COUNTIES SERVED

Milwaukee

Ozaukee

Racine

License Number: 123

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 72

Number of unduplicated patients in 2000 = 147

TOTAL NUMBER OF ADMISSIONS 96**PERCENT ADMISSIONS FROM:**

Private Residences 71.9%

General Hospitals 18.8

Nursing Homes 1.0

Other 8.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 79

PERCENT DISCHARGES TO:

Private Residences 49.4%

General Hospitals 40.5

Nursing Homes 7.6

Deaths 2.5

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	125	6,678	53.4
Home Health Aide	21	6,535	311.2
Physical Therapy	2	20	10.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	5	592	118.4
Personal Care/PC RN Supv.	176	21,213	120.5
Other Home Health Care	1	373	373.0
Homemkr & Other Non HH	7	390	55.7
TOTAL	XXXXXXX	35,801	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.7%	Medicare 5.9%
4 to 24 6.8	Medicaid 88.2
25 to 54 34.0	Other Federal 0.0
55 to 64 10.2	State Funds 4.6
65 to 74 21.8	Private Insurance 1.3
75 to 84 10.9	Self Pay 0.0
85 & over 15.6	Other 0.0
	TOTAL PATIENTS 152

Males 40.1% Females 59.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.7	Genitourinary Sys. 2.0
Diabetes 4.1	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 16.3
Dementia/Alzheimers 1.4	Osteopathies 1.4
Psychoses/Neuroses 2.7	Perinatal Period 0.0
Central Nervous Sys. 4.8	Ill-Defined Cond. 4.1
Paralysis/CP 16.3	Fractures 1.4
Cardiovascular 6.1	Wounds, Burns 1.4
Stroke 9.5	Compl. of Surgery 0.0
Respiratory 9.5	Other Conditions 18.4

REVENUE

Billings	\$ 2,807,750
Disallowances	1,025,528
Collections	1,782,222
Other	429,250
Total	2,211,472

EXPENSES

Total	\$ 2,115,479
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	5.5
Licensed Practical Nurses	1.8
Home Health Aides	10.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	25.5
Homemakers	0.0
Other Staff	8.8
TOTAL FTEs	53.8

Covenant Home Health & Hospice, Inc.

9688 West Appleton Avenue

Milwaukee WI 53225

Milwaukee County

(414) 535-6900

License Number: 179

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 258

Number of unduplicated patients in 2000 = 5,911

COUNTIES SERVED

Dodge

Kenosha

Milwaukee

Ozaukee

Racine

Sheboygan

Washington

Waukesha

TOTAL NUMBER OF ADMISSIONS 6,187**PERCENT ADMISSIONS FROM:**

Private Residences 26.0%

General Hospitals 67.5

Nursing Homes 6.4

Other 0.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 6,025

PERCENT DISCHARGES TO:

Private Residences 80.9%

General Hospitals 9.8

Nursing Homes 2.8

Deaths 1.8

Other 4.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	.	.	.
Home Health Aide	550	24,017	43.7
Physical Therapy	2,391	10,577	4.4
Spch/Occ/Resp Therapy	980	3,127	3.2
Medical Social Service	557	755	1.4
Private Duty Nursing	21	3,245	154.5
Personal Care/PC RN Supv.	.	.	.
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	30	814	27.1
TOTAL	XXXXXXX	104,334	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 11.3%	Medicare 50.9%
4 to 24 1.9	Medicaid 4.0
25 to 54 14.5	Other Federal 0.0
55 to 64 10.3	State Funds 0.0
65 to 74 18.2	Private Insurance 42.6
75 to 84 27.6	Self Pay 2.4
85 & over 16.3	Other 0.0
	TOTAL PATIENTS 6,179

Males 42.0% Females 58.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.2%	Digestive Disorders 3.6%
Cancer 8.6	Genitourinary Sys. 2.3
Diabetes 2.9	Preg. & Childbirth 0.2
Diseases of Blood 0.8	Arthropathies 11.0
Dementia/Alzheimers 0.3	Osteopathies 1.3
Psychoses/Neuroses 0.8	Perinatal Period 8.8
Central Nervous Sys. 2.2	Ill-Defined Cond. 7.6
Paralysis/CP 0.3	Fractures 4.2
Cardiovascular 16.2	Wounds, Burns 5.1
Stroke 3.0	Compl. of Surgery 3.3
Respiratory 5.6	Other Conditions 10.8

REVENUE

Billings	\$ 10,993,823
Disallowances	2,287,653
Collections	8,706,170
Other	230,385
Total	8,936,555

EXPENSES

Total	\$ 8,894,938
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	8.8
Registered Nurses	81.0
Licensed Practical Nurses	10.1
Home Health Aides	31.1
Physical Therapists	12.4
Occupational Therapists	3.2
Speech Pathologists	2.6
Respiratory Therapists	0.0
Medical Social Workers	4.5
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	1.0
Other Staff	22.2
TOTAL FTEs	177.9

Family Service of Milwaukee
3200 West Highland Boulevard
Milwaukee WI 53208

Milwaukee County

COUNTIES SERVED
Milwaukee

(414) 342-4560

License Number: 76

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 15

Number of unduplicated patients in 2000 = 54

TOTAL NUMBER OF ADMISSIONS 13

PERCENT ADMISSIONS FROM:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	0	0	0.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	108	3,399	31.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,399	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 16

PERCENT DISCHARGES TO:

Private Residences	18.8%
General Hospitals	12.5
Nursing Homes	31.3
Deaths	31.3
Other	6.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 0.0	Medicaid 33.9
25 to 54 0.0	Other Federal 57.1
55 to 64 0.0	State Funds 8.9
65 to 74 22.2	Private Insurance 0.0
75 to 84 38.9	Self Pay 0.0
85 & over 38.9	Other 0.0
	TOTAL PATIENTS 56

Males 22.2% Females 77.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 3.7	Genitourinary Sys. 1.9
Diabetes 5.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 42.6
Dementia/Alzheimers 5.6	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.9	Ill-Defined Cond. 1.9
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 11.1	Wounds, Burns 1.9
Stroke 14.8	Compl. of Surgery 0.0
Respiratory 1.9	Other Conditions 7.4

REVENUE

Billings \$	156,898
Disallowances	7,924
Collections	148,974
Other	120,700
Total	269,674

EXPENSES

Total \$	322,554
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STAFFING

FTEs

Administrators	0.4
Reg. Nurse Supervisors	0.2
Registered Nurses	0.7
Licensed Practical Nurses	0.0
Home Health Aides	3.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.2
Homemakers	4.6
Other Staff	0.5
TOTAL FTEs	12.7

Heartland Home Health Care

1845 North Farwell Avenue, Suite 301
Milwaukee WI 53202 Milwaukee County

(414) 273-6600

License Number: 218

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 116

Number of unduplicated patients in 2000 = 250

COUNTIES SERVED

Kenosha
Milwaukee
Ozaukee
Racine
Washington
Waukesha

TOTAL NUMBER OF ADMISSIONS 237

PERCENT ADMISSIONS FROM:

Private Residences	19.0%
General Hospitals	28.3
Nursing Homes	15.6
Other	37.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 253

PERCENT DISCHARGES TO:

Private Residences	67.6%
General Hospitals	10.3
Nursing Homes	10.3
Deaths	2.8
Other	9.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	151	1,843	12.2
Home Health Aide	21	2,362	112.5
Physical Therapy	32	352	11.0
Spch/Occ/Resp Therapy	11	88	8.0
Medical Social Service	18	45	2.5
Private Duty Nursing	1	1,095	1095
Personal Care/PC RN Supv.	254	23,622	93.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	12	1,248	104.0
TOTAL	XXXXXXX	30,655	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 22.1%
4 to 24 2.4	Medicaid 34.7
25 to 54 17.6	Other Federal 0.0
55 to 64 15.6	State Funds 0.0
65 to 74 27.6	Private Insurance 37.4
75 to 84 27.6	Self Pay 5.7
85 & over 9.2	Other 0.0
	TOTAL PATIENTS 262

Males 43.6% Females 56.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.8%	Digestive Disorders 2.0%
Cancer 0.0	Genitourinary Sys. 1.2
Diabetes 13.6	Preg. & Childbirth 1.2
Diseases of Blood 0.0	Arthropathies 8.4
Dementia/Alzheimers 4.0	Osteopathies 2.4
Psychoses/Neuroses 10.0	Perinatal Period 0.0
Central Nervous Sys. 2.0	Ill-Defined Cond. 0.0
Paralysis/CP 2.8	Fractures 3.6
Cardiovascular 16.0	Wounds, Burns 11.6
Stroke 2.0	Compl. of Surgery 2.4
Respiratory 15.2	Other Conditions 0.8

REVENUE

Billings \$	1,341,072
Disallowances	318,272
Collections	1,022,800
Other	0
Total	1,022,800

EXPENSES

Total \$	1,114,285
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	2.0
Licensed Practical Nurses	5.9
Home Health Aides	24.4
Physical Therapists	1.0
Occupational Therapists	1.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	18.8
Homemakers	1.0
Other Staff	2.3
TOTAL FTEs	59.5

Laabs Home Health Care, Inc.

619 North 35th

Milwaukee WI 53208

Milwaukee County

(414) 342-7442

COUNTIES SERVED

Milwaukee

Ozaukee

Waukesha

License Number: 147

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 45

Number of unduplicated patients in 2000 = 107

TOTAL NUMBER OF ADMISSIONS 51**PERCENT ADMISSIONS FROM:**

Private Residences 43.1%

General Hospitals 9.8

Nursing Homes 9.8

Other 37.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 53

PERCENT DISCHARGES TO:

Private Residences 45.3%

General Hospitals 15.1

Nursing Homes 24.5

Deaths 3.8

Other 11.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	65	14,931	229.7
Home Health Aide	15	2,830	188.7
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	8	1,496	187.0
Personal Care/PC RN Supv.	78	5,397	69.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	24,654	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 38.3%
4 to 24 8.4	Medicaid 61.7
25 to 54 26.2	Other Federal 0.0
55 to 64 9.3	State Funds 0.0
65 to 74 19.6	Private Insurance 0.0
75 to 84 16.8	Self Pay 0.0
85 & over 19.6	Other 0.0
	TOTAL PATIENTS 107

Males 40.2% Females 59.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 2.8%	Digestive Disorders 0.9%
Cancer 1.9	Genitourinary Sys. 4.7
Diabetes 29.0	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 11.2
Dementia/Alzheimers 5.6	Osteopathies 0.9
Psychoses/Neuroses 3.7	Perinatal Period 0.9
Central Nervous Sys. 1.9	Ill-Defined Cond. 0.9
Paralysis/CP 0.9	Fractures 0.9
Cardiovascular 5.6	Wounds, Burns 2.8
Stroke 0.9	Compl. of Surgery 0.0
Respiratory 2.8	Other Conditions 19.6

REVENUE

Billings	\$ 2,014,906
Disallowances	798,517
Collections	1,216,389
Other	0
Total	1,216,389

EXPENSES

Total	\$ 1,547,530
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	10.5
Licensed Practical Nurses	5.6
Home Health Aides	4.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	1.0
Personal Care Workers	5.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	29.1

Metro Home Health Services, Inc.

6014 West Congress Street
Milwaukee WI 53218

Milwaukee County

COUNTIES SERVED

Milwaukee

(414) 464-4490

License Number: 23

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 121

Number of unduplicated patients in 2000 = 230

TOTAL NUMBER OF ADMISSIONS 96

PERCENT ADMISSIONS FROM:

Private Residences	12.5%
General Hospitals	74.0
Nursing Homes	0.0
Other	13.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	95	1,564	16.5
Home Health Aide	16	1,380	86.3
Physical Therapy	41	520	12.7
Spch/Occ/Resp Therapy	5	95	19.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	374	41,983	112.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	6	392	65.3
TOTAL	XXXXXXX	45,934	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 96

PERCENT DISCHARGES TO:

Private Residences	51.0%
General Hospitals	21.9
Nursing Homes	6.3
Deaths	9.4
Other	11.5

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 9.9%
4 to 24 1.7	Medicaid 80.6
25 to 54 20.4	Other Federal 0.0
55 to 64 13.0	State Funds 0.4
65 to 74 24.3	Private Insurance 6.8
75 to 84 24.3	Self Pay 0.0
85 & over 16.1	Other 2.3
	TOTAL PATIENTS 263

Males 26.5% Females 73.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.4%	Digestive Disorders 1.7%
Cancer 0.9	Genitourinary Sys. 3.0
Diabetes 7.4	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 19.6
Dementia/Alzheimers 4.8	Osteopathies 0.4
Psychoses/Neuroses 4.3	Perinatal Period 0.4
Central Nervous Sys. 3.5	Ill-Defined Cond. 2.2
Paralysis/CP 7.8	Fractures 1.3
Cardiovascular 13.0	Wounds, Burns 1.3
Stroke 13.5	Compl. of Surgery 0.4
Respiratory 6.1	Other Conditions 7.8

REVENUE

Billings	\$ 2,438,773
Disallowances	523,583
Collections	1,915,190
Other	175,088
Total	2,090,278

EXPENSES

Total	\$ 2,326,374
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	2.3
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	75.9
Homemakers	0.2
Other Staff	12.1
TOTAL FTEs	92.8

Midamerica Healthcare Corporation of Wisconsin
 7905 West Appleton Avenue, #201
 Milwaukee WI 53218 Milwaukee County

COUNTIES SERVED
 Milwaukee
 Waukesha

(414) 578-2961

License Number: 309
 Ownership of Agency: Proprietary Corporation
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 315
 Number of unduplicated patients in 2000 = 429

TOTAL NUMBER OF ADMISSIONS 157

PERCENT ADMISSIONS FROM:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 109

PERCENT DISCHARGES TO:

Private Residences	66.1%
General Hospitals	13.8
Nursing Homes	0.0
Deaths	10.1
Other	10.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	146	2,969	20.3
Home Health Aide	20	2,432	121.6
Physical Therapy	50	388	7.8
Spch/Occ/Resp Therapy	42	128	3.0
Medical Social Service	4	15	3.8
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	771	195,308	253.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	3	385	128.3
TOTAL	XXXXXXX	201,625	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.2%	Medicare 4.7%
4 to 24 3.7	Medicaid 94.4
25 to 54 9.6	Other Federal 0.0
55 to 64 11.9	State Funds 0.7
65 to 74 31.5	Private Insurance 0.2
75 to 84 28.9	Self Pay 0.0
85 & over 14.2	Other 0.0
	TOTAL PATIENTS 444

Males 31.5% Females 68.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.5%	Digestive Disorders 1.4%
Cancer 2.1	Genitourinary Sys. 1.9
Diabetes 2.8	Preg. & Childbirth 0.0
Diseases of Blood 1.2	Arthropathies 39.6
Dementia/Alzheimers 2.1	Osteopathies 2.6
Psychoses/Neuroses 3.0	Perinatal Period 0.2
Central Nervous Sys. 1.6	Ill-Defined Cond. 9.3
Paralysis/CP 4.2	Fractures 1.4
Cardiovascular 6.8	Wounds, Burns 0.9
Stroke 8.2	Compl. of Surgery 0.0
Respiratory 3.7	Other Conditions 6.5

REVENUE

Billings	\$ 8,831,746
Disallowances	3,232,376
Collections	5,599,370
Other	0
Total	5,599,370

EXPENSES

Total	\$ 5,216,982
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STAFFING

FTEs

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.2
Licensed Practical Nurses	0.0
Home Health Aides	2.1
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.1
Personal Care Workers	278.3
Homemakers	0.2
Other Staff	7.6
TOTAL FTEs	297.4

Preferred Home Health Services, LLC

10919 West Bluemound Road

Milwaukee WI 53226

Milwaukee County

COUNTIES SERVED

Milwaukee

Waukesha

(414) 774-3901

License Number: 278

Ownership of Agency: Limited Liability Partnership

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 46

Number of unduplicated patients in 2000 = 145

TOTAL NUMBER OF ADMISSIONS 139**PERCENT ADMISSIONS FROM:**

Private Residences 74.8%

General Hospitals 15.1

Nursing Homes 1.4

Other 8.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 100

PERCENT DISCHARGES TO:

Private Residences 48.0%

General Hospitals 44.0

Nursing Homes 4.0

Deaths 4.0

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	61	4,388	71.9
Home Health Aide	23	2,783	121.0
Physical Therapy	10	139	13.9
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	1	132	132.0
Personal Care/PC RN Supv.	153	8,367	54.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	4	215	53.8
TOTAL	XXXXXXX	16,024	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 15.8%
4 to 24 6.9	Medicaid 67.1
25 to 54 31.7	Other Federal 0.7
55 to 64 9.7	State Funds 0.0
65 to 74 17.2	Private Insurance 5.9
75 to 84 15.2	Self Pay 10.5
85 & over 19.3	Other 0.0
	TOTAL PATIENTS 152

Males 26.9% Females 73.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 1.4
Diabetes 3.4	Preg. & Childbirth 0.0
Diseases of Blood 6.2	Arthropathies 20.7
Dementia/Alzheimers 2.1	Osteopathies 4.1
Psychoses/Neuroses 5.5	Perinatal Period 0.0
Central Nervous Sys. 2.8	Ill-Defined Cond. 15.2
Paralysis/CP 9.7	Fractures 1.4
Cardiovascular 6.2	Wounds, Burns 2.8
Stroke 4.1	Compl. of Surgery 0.7
Respiratory 3.4	Other Conditions 9.7

REVENUE

Billings	\$ 1,142,644
Disallowances	557,000
Collections	585,644
Other	0
Total	585,644

EXPENSES

Total	\$ 585,593
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 0.6

Registered Nurses 2.9

Licensed Practical Nurses 0.0

Home Health Aides 5.0

Physical Therapists 0.1

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 5.9

Homemakers 0.2

Other Staff 2.1

TOTAL FTEs 17.8

St. John's Home Health Service

1756 North Prospect Avenue

Milwaukee WI 53202

Milwaukee County

(414) 272-2273

COUNTIES SERVED

Milwaukee

Ozaukee

Racine

Washington

Waukesha

License Number: 167

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 23

Number of unduplicated patients in 2000 = 218

TOTAL NUMBER OF ADMISSIONS 91**PERCENT ADMISSIONS FROM:**

Private Residences 64.8%

General Hospitals 8.8

Nursing Homes 3.3

Other 23.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 154

PERCENT DISCHARGES TO:

Private Residences 84.4%

General Hospitals 11.0

Nursing Homes 1.3

Deaths 3.2

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	40	794	19.9
Home Health Aide	86	11,668	135.7
Physical Therapy	24	213	8.9
Spch/Occ/Resp Therapy	14	59	4.2
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	36	3,875	107.6
Other Home Health Care	8	33	4.1
Homemkr & Other Non HH	143	6,337	44.3
TOTAL	XXXXXXX	22,979	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 15.1%
4 to 24 0.5	Medicaid 10.1
25 to 54 6.0	Other Federal 0.5
55 to 64 6.9	State Funds 2.8
65 to 74 11.5	Private Insurance 4.6
75 to 84 35.8	Self Pay 67.0
85 & over 39.4	Other 0.0
	TOTAL PATIENTS 218

Males 28.4% Females 71.6 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS	
Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.5	Genitourinary Sys. 0.0
Diabetes 0.9	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.7
Dementia/Alzheimers 3.7	Osteopathies 1.8
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.8	Ill-Defined Cond. 0.0
Paralysis/CP 3.2	Fractures 6.0
Cardiovascular 4.6	Wounds, Burns 1.4
Stroke 5.5	Compl. of Surgery 0.0
Respiratory 2.8	Other Conditions 64.2

REVENUE

Billings	\$ 2,242,228
Disallowances	250,554
Collections	1,991,674
Other	155,750
Total	2,147,424

EXPENSES

Total	\$ 2,188,276
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	32.8
Physical Therapists	2.4
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	8.8
Other Staff	4.2
TOTAL FTEs	52.4

Visiting Nurse Association of Wisconsin

11333 West National Avenue

Milwaukee WI 53227

Milwaukee County

(414) 327-2295

License Number: 81

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 656

Number of unduplicated patients in 2000 = 10,308

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	9,042	121,420	13.4
Home Health Aide	1,843	48,032	26.1
Physical Therapy	3,099	28,877	9.3
Spch/Occ/Resp Therapy	1,045	8,983	8.6
Medical Social Service	1,195	1,781	1.5
Private Duty Nursing	14	580	41.4
Personal Care/PC RN Supv.	688	36,065	52.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	143	6,113	42.7
TOTAL	XXXXXXX	251,851	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.3%	Medicare 65.1%
4 to 24 3.8	Medicaid 9.0
25 to 54 14.4	Other Federal 0.3
55 to 64 10.6	State Funds 0.0
65 to 74 20.3	Private Insurance 22.5
75 to 84 29.3	Self Pay 3.1
85 & over 16.3	Other 0.0
	TOTAL PATIENTS 10,308

Males 42.5% Females 57.5 %

PRIMARY DIAGNOSIS

Infectious Disorders	1.0%	Digestive Disorders	4.7%
Cancer	10.5	Genitourinary Sys.	4.0
Diabetes	4.2	Preg. & Childbirth	0.2
Diseases of Blood	1.1	Arthropathies	8.0
Dementia/Alzheimers	0.4	Osteopathies	1.1
Psychoses/Neuroses	1.8	Perinatal Period	2.4
Central Nervous Sys.	2.5	Ill-Defined Cond.	8.2
Paralysis/CP	0.5	Fractures	4.6
Cardiovascular	21.0	Wounds, Burns	2.3
Stroke	3.0	Compl. of Surgery	2.8
Respiratory	6.2	Other Conditions	9.5

COUNTIES SERVED

Brown
Calumet
Dodge
Fond du Lac
Green Lake
Jefferson
Kenosha
Kewaunee
Manitowoc
Milwaukee
Ozaukee
Racine
Sheboygan
Walworth
Washington
Waukesha
Winnebago

TOTAL NUMBER OF ADMISSIONS 10,799**PERCENT ADMISSIONS FROM:**

Private Residences	22.0%
General Hospitals	62.7
Nursing Homes	2.0
Other	13.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 10,911

PERCENT DISCHARGES TO:

Private Residences	74.1%
General Hospitals	16.0
Nursing Homes	3.1
Deaths	2.4
Other	4.5

STAFFING**FTEs**

Administrators	3.0
Reg. Nurse Supervisors	14.8
Registered Nurses	91.5
Licensed Practical Nurses	8.9
Home Health Aides	83.9
Physical Therapists	21.4
Occupational Therapists	4.5
Speech Pathologists	1.0
Respiratory Therapists	0.0
Medical Social Workers	7.4
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	6.9
Other Staff	92.0
TOTAL FTEs	335.3

REVENUE

Billings	\$ 21,927,686
Disallowances	4,838,964
Collections	17,088,722
Other	804,278
Total	17,893,000

EXPENSES

Total	\$ 19,474,740
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"Your Nurse" Home Health Care, Inc.

5818 West Bluemound Road, #100

Milwaukee WI 53213

Milwaukee County

COUNTIES SERVED

Milwaukee

Washington

Waukesha

(414) 774-9400

License Number: 312

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 29

Number of unduplicated patients in 2000 = 41

TOTAL NUMBER OF ADMISSIONS 11**PERCENT ADMISSIONS FROM:**

Private Residences 63.6%

General Hospitals 36.4

Nursing Homes 0.0

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 17

PERCENT DISCHARGES TO:

Private Residences 41.2%

General Hospitals 29.4

Nursing Homes 0.0

Deaths 11.8

Other 17.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	21	5,272	251.0
Home Health Aide	2	344	172.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	17	4,272	251.3
Personal Care/PC RN Supv.	18	1,306	72.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	11,194	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 12.2%	Medicare 0.0%
4 to 24 36.6	Medicaid 90.2
25 to 54 29.3	Other Federal 0.0
55 to 64 7.3	State Funds 0.0
65 to 74 7.3	Private Insurance 4.9
75 to 84 7.3	Self Pay 4.9
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 41

Males 61.0% Females 39.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 2.4
Diabetes 14.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 2.4
Central Nervous Sys. 0.0	Ill-Defined Cond. 4.9
Paralysis/CP 39.0	Fractures 0.0
Cardiovascular 4.9	Wounds, Burns 9.8
Stroke 2.4	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 19.5

REVENUE

Billings \$	1,432,095
Disallowances	1,001
Collections	1,431,094
Other	1,942
Total	1,433,036

EXPENSES

Total \$	1,369,012
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	5.2
Licensed Practical Nurses	10.7
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.9
Homemakers	0.0
Other Staff	0.6
TOTAL FTEs	20.4

Nursing Consultant & Care Management

3878 North Morris Boulevard

Shorewood WI 53211

Milwaukee County

COUNTIES SERVED

Milwaukee

(414) 964-8800

License Number: 225

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 20

TOTAL NUMBER OF ADMISSIONS 12**PERCENT ADMISSIONS FROM:**

Private Residences 58.3%

General Hospitals 8.3

Nursing Homes 16.7

Other 16.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	20	1,040	52.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	5	625	125.0
Personal Care/PC RN Supv.	40	4,970	124.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,635	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 9

PERCENT DISCHARGES TO:

Private Residences 33.3%

General Hospitals 0.0

Nursing Homes 11.1

Deaths 44.4

Other 11.1

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 5.0	Medicaid 0.0
25 to 54 0.0	Other Federal 0.0
55 to 64 5.0	State Funds 0.0
65 to 74 5.0	Private Insurance 0.0
75 to 84 30.0	Self Pay 100.0
85 & over 55.0	Other 0.0
	TOTAL PATIENTS 20

Males 30.0% Females 70.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 5.0%
Cancer 10.0	Genitourinary Sys. 0.0
Diabetes 10.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 15.0
Dementia/Alzheimers 15.0	Osteopathies 0.0
Psychoses/Neuroses 5.0	Perinatal Period 0.0
Central Nervous Sys. 15.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 10.0
Stroke 5.0	Compl. of Surgery 0.0
Respiratory 5.0	Other Conditions 5.0

REVENUE

Billings \$	905,540
Disallowances	0
Collections	905,540
Other	205
Total	905,745

EXPENSES

Total \$	869,211
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STAFFING**FTEs**

Administrators 2.0

Reg. Nurse Supervisors 1.6

Registered Nurses 1.8

Licensed Practical Nurses 0.5

Home Health Aides 0.0

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 22.3

Homemakers 0.0

Other Staff 0.0

TOTAL FTEs 28.2

ANew Home Health Care

7425 Harwood Avenue

Wauwatosa WI 53213

Milwaukee County

COUNTIES SERVED

Milwaukee

Waukesha

(414) 475-7788

License Number: 122

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 85

Number of unduplicated patients in 2000 = 361

TOTAL NUMBER OF ADMISSIONS 135**PERCENT ADMISSIONS FROM:**

Private Residences 89.6%

General Hospitals 9.6

Nursing Homes 0.7

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 186

PERCENT DISCHARGES TO:

Private Residences 65.6%

General Hospitals 26.9

Nursing Homes 2.7

Deaths 3.2

Other 1.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	18	468	26.0
Home Health Aide	15	5,145	343.0
Physical Therapy	12	234	19.5
Spch/Occ/Resp Therapy	2	33	16.5
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	580	67,782	116.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	71	3,605	50.8
TOTAL	XXXXXXX	77,267	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 13.5%
4 to 24 1.7	Medicaid 66.7
25 to 54 10.2	Other Federal 0.0
55 to 64 10.2	State Funds 18.8
65 to 74 24.4	Private Insurance 0.3
75 to 84 29.9	Self Pay 0.8
85 & over 23.5	Other 0.0
	TOTAL PATIENTS 384

Males 23.3% Females 76.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.3%	Digestive Disorders 0.3%
Cancer 0.6	Genitourinary Sys. 0.3
Diabetes 0.6	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 38.8
Dementia/Alzheimers 2.8	Osteopathies 5.8
Psychoses/Neuroses 2.8	Perinatal Period 0.3
Central Nervous Sys. 3.0	Ill-Defined Cond. 6.6
Paralysis/CP 3.9	Fractures 0.6
Cardiovascular 10.8	Wounds, Burns 2.2
Stroke 9.7	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 10.8

REVENUE

Billings	\$ 2,434,352
Disallowances	638
Collections	2,433,714
Other	40,770
Total	2,474,484

EXPENSES

Total	\$ 2,105,963
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	5.5
Licensed Practical Nurses	0.0
Home Health Aides	5.3
Physical Therapists	0.4
Occupational Therapists	0.3
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	2.3
Other Therapeutic Staff	0.0
Personal Care Workers	61.8
Homemakers	7.1
Other Staff	10.7
TOTAL FTEs	95.4

Camillus Cares Home Health

10100 West Bluemound Road

Wauwatosa WI 53226

Milwaukee County

COUNTIES SERVED

Milwaukee

Waukesha

(414) 258-2418

License Number: 148

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 10

Number of unduplicated patients in 2000 = 113

TOTAL NUMBER OF ADMISSIONS 109**PERCENT ADMISSIONS FROM:**

Private Residences 35.8%

General Hospitals 50.5

Nursing Homes 9.2

Other 4.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	83	1,063	12.8
Home Health Aide	47	6,806	144.8
Physical Therapy	48	386	8.0
Spch/Occ/Resp Therapy	21	140	6.7
Medical Social Service	0	0	0.0
Private Duty Nursing	24	716	29.8
Personal Care/PC RN Supv.	8	150	18.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,261	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 136

PERCENT DISCHARGES TO:

Private Residences 64.7%

General Hospitals 17.6

Nursing Homes 9.6

Deaths 8.1

Other 0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 57.3%
4 to 24 0.9	Medicaid 3.4
25 to 54 3.5	Other Federal 0.0
55 to 64 2.7	State Funds 1.1
65 to 74 6.2	Private Insurance 5.1
75 to 84 31.0	Self Pay 32.6
85 & over 55.8	Other 0.6
	TOTAL PATIENTS 178

Males 27.4% Females 72.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.7%
Cancer 7.1	Genitourinary Sys. 3.5
Diabetes 3.5	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 4.4
Dementia/Alzheimers 1.8	Osteopathies 0.9
Psychoses/Neuroses 5.3	Perinatal Period 1.8
Central Nervous Sys. 3.5	Ill-Defined Cond. 15.0
Paralysis/CP 0.9	Fractures 8.0
Cardiovascular 22.1	Wounds, Burns 3.5
Stroke 3.5	Compl. of Surgery 0.0
Respiratory 4.4	Other Conditions 7.1

REVENUE

Billings \$	516,642
Disallowances	35,408
Collections	481,234
Other	0
Total	481,234

EXPENSES

Total \$	494,220
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 0.8

Registered Nurses 1.3

Licensed Practical Nurses 0.1

Home Health Aides 21.0

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 0.0

Homemakers 0.0

Other Staff 1.7

TOTAL FTEs 25.8

Gentiva Health Services

10909 West Greenfield Avenue

West Allis WI 53214

Milwaukee County

(414) 257-1156

License Number: 237

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 258

Number of unduplicated patients in 2000 = 1,849

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,611	10,567	6.6
Home Health Aide	140	7,478	53.4
Physical Therapy	407	2,798	6.9
Spch/Occ/Resp Therapy	150	809	5.4
Medical Social Service	19	19	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	228	13,760	60.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	35,431	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 28.7%	Medicare 11.2%
4 to 24 13.9	Medicaid 12.2
25 to 54 18.2	Other Federal 0.0
55 to 64 10.1	State Funds 0.0
65 to 74 9.7	Private Insurance 70.0
75 to 84 11.6	Self Pay 6.7
85 & over 7.7	Other 0.0
	TOTAL PATIENTS 2,204

Males 45.8% Females 54.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 3.6%
Cancer 5.7	Genitourinary Sys. 1.7
Diabetes 3.5	Preg. & Childbirth 0.4
Diseases of Blood 0.6	Arthropathies 0.6
Dementia/Alzheimers 0.4	Osteopathies 8.2
Psychoses/Neuroses 0.8	Perinatal Period 17.8
Central Nervous Sys. 8.3	Ill-Defined Cond. 5.4
Paralysis/CP 0.0	Fractures 4.6
Cardiovascular 9.3	Wounds, Burns 4.3
Stroke 0.0	Compl. of Surgery 0.8
Respiratory 11.5	Other Conditions 11.4

COUNTIES SERVED

Columbia
Dane
Dodge
Fond du Lac
Green
Iowa
Jefferson
Milwaukee
Ozaukee
Racine
Rock
Sauk
Sheboygan
Walworth
Washington
Waukesha
Winnebago

TOTAL NUMBER OF ADMISSIONS 1,655**PERCENT ADMISSIONS FROM:**

Private Residences	83.3%
General Hospitals	12.7
Nursing Homes	0.2
Other	3.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,736

PERCENT DISCHARGES TO:

Private Residences	94.8%
General Hospitals	1.2
Nursing Homes	1.0
Deaths	0.7
Other	2.3

STAFFING**FTEs**

Administrators	0.6
Reg. Nurse Supervisors	1.1
Registered Nurses	20.4
Licensed Practical Nurses	5.2
Home Health Aides	25.2
Physical Therapists	2.2
Occupational Therapists	0.9
Speech Pathologists	0.2
Respiratory Therapists	0.0
Medical Social Workers	0.2
Other Therapeutic Staff	0.0
Personal Care Workers	2.5
Homemakers	0.0
Other Staff	7.5
TOTAL FTEs	66.1

REVENUE

Billings	\$ 4,462,709
Disallowances	909,127
Collections	3,553,582
Other	0
Total	3,553,582

EXPENSES

Total	\$ 3,493,948
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Gentiva Health Services

10909 West Greenfield Avenue

West Allis WI 53214

Milwaukee County

(414) 257-1156

License Number: 287

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 30

Number of unduplicated patients in 2000 = 232

COUNTIES SERVED

Dane

Dodge

Green

Jefferson

Kenosha

Milwaukee

Ozaukee

Racine

Rock

Walworth

Washington

Waukesha

TOTAL NUMBER OF ADMISSIONS 106**PERCENT ADMISSIONS FROM:**

Private Residences 74.5%

General Hospitals 15.1

Nursing Homes 0.0

Other 10.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	50	6,268	125.4
Home Health Aide	96	4,617	48.1
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	20	1,306	65.3
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	108	3,613	33.5
Homemkr & Other Non HH	16	270	16.9
TOTAL	XXXXXXX	16,074	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 144

PERCENT DISCHARGES TO:

Private Residences 72.2%

General Hospitals 4.2

Nursing Homes 9.0

Deaths 6.3

Other 8.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 7.3%	Medicare 0.0%
4 to 24 15.5	Medicaid 0.0
25 to 54 16.8	Other Federal 0.0
55 to 64 9.9	State Funds 0.0
65 to 74 8.2	Private Insurance 81.6
75 to 84 23.7	Self Pay 18.4
85 & over 18.5	Other 0.0
	TOTAL PATIENTS 304

Males 39.2% Females 60.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.4%
Cancer 2.2	Genitourinary Sys. 0.0
Diabetes 3.0	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 12.9
Dementia/Alzheimers 2.6	Osteopathies 0.0
Psychoses/Neuroses 3.9	Perinatal Period 1.3
Central Nervous Sys. 23.7	Ill-Defined Cond. 7.8
Paralysis/CP 0.0	Fractures 4.3
Cardiovascular 19.0	Wounds, Burns 1.3
Stroke 0.0	Compl. of Surgery 0.4
Respiratory 6.0	Other Conditions 10.3

REVENUE

Billings \$	559,786
Disallowances	11,066
Collections	548,720
Other	0
Total	548,720

EXPENSES

Total \$	559,079
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STAFFING**FTEs**

Administrators	0.6
Reg. Nurse Supervisors	0.2
Registered Nurses	3.1
Licensed Practical Nurses	0.8
Home Health Aides	3.8
Physical Therapists	0.3
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.1
TOTAL FTEs	10.0

Professional Home Care Services

8410 West Cleveland Avenue

West Allis WI 53227

Milwaukee County

COUNTIES SERVED

Milwaukee

Waukesha

(414) 541-6010

License Number: 279

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 25

Number of unduplicated patients in 2000 = 57

TOTAL NUMBER OF ADMISSIONS 30**PERCENT ADMISSIONS FROM:**

Private Residences 43.3%

General Hospitals 23.3

Nursing Homes 33.3

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 35

PERCENT DISCHARGES TO:

Private Residences 45.7%

General Hospitals 25.7

Nursing Homes 0.0

Deaths 2.9

Other 25.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	53	2,634	49.7
Home Health Aide	43	4,110	95.6
Physical Therapy	5	58	11.6
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	90	7,224	80.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,026	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 9.1%
4 to 24 0.0	Medicaid 53.0
25 to 54 36.8	Other Federal 0.0
55 to 64 12.3	State Funds 12.1
65 to 74 10.5	Private Insurance 4.5
75 to 84 19.3	Self Pay 9.1
85 & over 21.1	Other 12.1
	TOTAL PATIENTS 66

Males 29.8% Females 70.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 8.8%	Digestive Disorders 0.0%
Cancer 7.0	Genitourinary Sys. 5.3
Diabetes 7.0	Preg. & Childbirth 0.0
Diseases of Blood 1.8	Arthropathies 5.3
Dementia/Alzheimers 3.5	Osteopathies 0.0
Psychoses/Neuroses 3.5	Perinatal Period 1.8
Central Nervous Sys. 1.8	Ill-Defined Cond. 1.8
Paralysis/CP 12.3	Fractures 7.0
Cardiovascular 10.5	Wounds, Burns 1.8
Stroke 5.3	Compl. of Surgery 0.0
Respiratory 1.8	Other Conditions 14.0

REVENUE

Billings \$	807,207
Disallowances	290,750
Collections	516,457
Other	0
Total	516,457

EXPENSES

Total \$	519,086
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	1.4
Licensed Practical Nurses	0.0
Home Health Aides	3.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTEs	14.2

Monroe County Health Department

14301 County Highway B, Box 18

Sparta WI 54656

Monroe County

COUNTIES SERVED

Monroe

(608) 269-8666

License Number: 83

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 11

Number of unduplicated patients in 2000 = 155

TOTAL NUMBER OF ADMISSIONS 103**PERCENT ADMISSIONS FROM:**

Private Residences 14.6%

General Hospitals 29.1

Nursing Homes 5.8

Other 50.5

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 108

PERCENT DISCHARGES TO:

Private Residences 51.9%

General Hospitals 23.1

Nursing Homes 13.0

Deaths 11.1

Other 0.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	155	2,634	17.0
Home Health Aide	57	1,469	25.8
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	22	628	28.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,731	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.9%	Medicare 37.0%
4 to 24 0.0	Medicaid 13.2
25 to 54 5.8	Other Federal 0.0
55 to 64 8.4	State Funds 7.9
65 to 74 19.4	Private Insurance 11.1
75 to 84 37.4	Self Pay 13.2
85 & over 27.1	Other 17.5
	TOTAL PATIENTS 189

Males 31.6% Females 68.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.3%	Digestive Disorders 0.0%
Cancer 5.8	Genitourinary Sys. 5.2
Diabetes 12.9	Preg. & Childbirth 0.0
Diseases of Blood 1.3	Arthropathies 8.4
Dementia/Alzheimers 0.0	Osteopathies 0.6
Psychoses/Neuroses 1.9	Perinatal Period 0.0
Central Nervous Sys. 0.6	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 3.9
Cardiovascular 31.0	Wounds, Burns 3.9
Stroke 1.9	Compl. of Surgery 0.6
Respiratory 7.7	Other Conditions 12.9

REVENUE

Billings \$	174,173
Disallowances	94,110
Collections	80,063
Other	0
Total	80,063

EXPENSES

Total \$	292,724
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.2
Licensed Practical Nurses	0.0
Home Health Aides	1.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	1.3
TOTAL FTEs	7.3

Ministry Home Care, Inc.

1860 North Stevens Street, PO Box 716
 Rhinelander WI 54501 Oneida County

(715) 369-6471

License Number: 253
 Ownership of Agency: Nonprofit Church/Corporation
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 22
 Number of unduplicated patients in 2000 = 342

COUNTIES SERVED

Forest
 Langlade
 Lincoln
 Oneida
 Price
 Vilas

TOTAL NUMBER OF ADMISSIONS 388

PERCENT ADMISSIONS FROM:

Private Residences	32.2%
General Hospitals	57.5
Nursing Homes	8.0
Other	2.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 377

PERCENT DISCHARGES TO:

Private Residences	73.7%
General Hospitals	7.2
Nursing Homes	6.9
Deaths	2.1
Other	10.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	301	4,091	13.6
Home Health Aide	100	1,350	13.5
Physical Therapy	167	1,862	11.1
Spch/Occ/Resp Therapy	74	388	5.2
Medical Social Service	72	87	1.2
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	4	165	41.3
Other Home Health Care	2	4	2.0
Homemkr & Other Non HH	7	172	24.6
TOTAL	XXXXXXX	8,119	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 81.0%
4 to 24 0.9	Medicaid 3.8
25 to 54 8.8	Other Federal 0.0
55 to 64 12.3	State Funds 0.0
65 to 74 19.6	Private Insurance 13.5
75 to 84 33.3	Self Pay 1.8
85 & over 25.1	Other 0.0
	TOTAL PATIENTS 342

Males 40.4% Females 59.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.9%	Digestive Disorders 4.4%
Cancer 9.6	Genitourinary Sys. 2.3
Diabetes 2.9	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 14.3
Dementia/Alzheimers 0.6	Osteopathies 1.8
Psychoses/Neuroses 0.6	Perinatal Period 0.0
Central Nervous Sys. 2.9	Ill-Defined Cond. 12.0
Paralysis/CP 0.3	Fractures 6.4
Cardiovascular 16.1	Wounds, Burns 2.9
Stroke 5.3	Compl. of Surgery 1.8
Respiratory 5.8	Other Conditions 8.2

REVENUE

Billings \$	852,997
Disallowances	123,917
Collections	729,080
Other	0
Total	729,080

EXPENSES

Total \$	765,129
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	1.0
Registered Nurses	3.3
Licensed Practical Nurses	0.0
Home Health Aides	2.5
Physical Therapists	1.8
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.1
Homemakers	0.0
Other Staff	1.6
TOTAL FTEs	10.9

Dr. Kate Newcomb Home Health Agency

240 Maple Street, PO Box 770

Woodruff WI 54568

Oneida County

(715) 356-8805

COUNTIES SERVED

Forest
Iron
Lincoln
Oneida
Price
Vilas

License Number: 86

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 35

Number of unduplicated patients in 2000 = 472

TOTAL NUMBER OF ADMISSIONS 499**PERCENT ADMISSIONS FROM:**

Private Residences 35.7%
General Hospitals 57.7
Nursing Homes 5.8
Other 0.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	421	6,065	14.4
Home Health Aide	155	5,969	38.5
Physical Therapy	196	1,643	8.4
Spch/Occ/Resp Therapy	58	237	4.1
Medical Social Service	68	104	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	29	681	23.5
TOTAL	XXXXXXX	14,699	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 481

PERCENT DISCHARGES TO:

Private Residences 79.2%
General Hospitals 5.0
Nursing Homes 7.1
Deaths 2.3
Other 6.4

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.1%	Medicare 76.8%
4 to 24 1.7	Medicaid 7.0
25 to 54 8.1	Other Federal 1.2
55 to 64 8.9	State Funds 0.5
65 to 74 19.1	Private Insurance 9.2
75 to 84 33.9	Self Pay 5.2
85 & over 27.3	Other 0.0
	TOTAL PATIENTS 573

Males 40.0% Females 60.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.7%	Digestive Disorders 4.4%
Cancer 7.4	Genitourinary Sys. 2.1
Diabetes 4.7	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 10.2
Dementia/Alzheimers 0.8	Osteopathies 0.8
Psychoses/Neuroses 0.6	Perinatal Period 0.2
Central Nervous Sys. 1.9	Ill-Defined Cond. 11.4
Paralysis/CP 2.5	Fractures 6.8
Cardiovascular 11.7	Wounds, Burns 10.6
Stroke 2.8	Compl. of Surgery 1.7
Respiratory 8.9	Other Conditions 7.0

REVENUE

Billings \$ 1,487,945
Disallowances 380,721
Collections 1,107,224
Other 1,034
Total 1,108,258

EXPENSES

Total \$ 1,287,013

STAFFING**FTEs**

Administrators 0.5
Reg. Nurse Supervisors 1.0
Registered Nurses 5.9
Licensed Practical Nurses 0.0
Home Health Aides 7.7
Physical Therapists 0.0
Occupational Therapists 0.0
Speech Pathologists 0.0
Respiratory Therapists 0.0
Medical Social Workers 0.0
Other Therapeutic Staff 0.0
Personal Care Workers 0.0
Homemakers 0.0
Other Staff 4.0
TOTAL FTEs 19.1

Ozaukee County Public Health Department

121 West Main, Box 994

Port Washington WI 53074

Ozaukee County

COUNTIES SERVED

Ozaukee

(262) 284-8170

License Number: 89

Ownership of Agency: County

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 65

TOTAL NUMBER OF ADMISSIONS 53**PERCENT ADMISSIONS FROM:**

Private Residences 49.1%

General Hospitals 5.7

Nursing Homes 7.5

Other 37.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	38	235	6.2
Home Health Aide	40	1,016	25.4
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	50	1,725	34.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,976	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 43

PERCENT DISCHARGES TO:

Private Residences 30.2%

General Hospitals 25.6

Nursing Homes 7.0

Deaths 9.3

Other 27.9

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 1.5	Medicaid 41.4
25 to 54 9.2	Other Federal 0.0
55 to 64 6.2	State Funds 0.0
65 to 74 21.5	Private Insurance 5.7
75 to 84 38.5	Self Pay 52.9
85 & over 23.1	Other 0.0
	TOTAL PATIENTS 70

Males 24.6% Females 75.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 13.8	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 9.2
Dementia/Alzheimers 3.1	Osteopathies 3.1
Psychoses/Neuroses 1.5	Perinatal Period 0.0
Central Nervous Sys. 3.1	Ill-Defined Cond. 0.0
Paralysis/CP 3.1	Fractures 6.2
Cardiovascular 10.8	Wounds, Burns 9.2
Stroke 10.8	Compl. of Surgery 0.0
Respiratory 7.7	Other Conditions 18.5

REVENUE

Billings \$	94,331
Disallowances	46,046
Collections	48,285
Other	0
Total	48,285

EXPENSES

Total \$	346,668
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.0
Licensed Practical Nurses	0.0
Home Health Aides	2.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTEs	8.0

Pepin County Nursing Service

740 7th Avenue West, PO Box 39

Durand WI 54736

Pepin County

COUNTIES SERVED

Pepin

(715) 672-5961

License Number: 90

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 27

Number of unduplicated patients in 2000 = 116

TOTAL NUMBER OF ADMISSIONS 100**PERCENT ADMISSIONS FROM:**

Private Residences 64.0%

General Hospitals 22.0

Nursing Homes 11.0

Other 3.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 109

PERCENT DISCHARGES TO:

Private Residences 33.9%

General Hospitals 22.9

Nursing Homes 11.0

Deaths 3.7

Other 28.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	82	450	5.5
Home Health Aide	14	204	14.6
Physical Therapy	2	5	2.5
Spch/Occ/Resp Therapy	1	2	2.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	98	5,486	56.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	78	4,716	60.5
TOTAL	XXXXXXX	10,863	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 10.5%
4 to 24 2.6	Medicaid 22.4
25 to 54 12.9	Other Federal 0.0
55 to 64 12.9	State Funds 57.1
65 to 74 13.8	Private Insurance 0.9
75 to 84 30.2	Self Pay 9.1
85 & over 27.6	Other 0.0
	TOTAL PATIENTS 219

Males 32.8% Females 67.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.9%	Digestive Disorders 1.7%
Cancer 6.0	Genitourinary Sys. 1.7
Diabetes 4.3	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 20.7
Dementia/Alzheimers 1.7	Osteopathies 1.7
Psychoses/Neuroses 8.6	Perinatal Period 0.0
Central Nervous Sys. 3.4	Ill-Defined Cond. 0.9
Paralysis/CP 2.6	Fractures 5.2
Cardiovascular 21.6	Wounds, Burns 1.7
Stroke 2.6	Compl. of Surgery 0.9
Respiratory 4.3	Other Conditions 7.8

REVENUE

Billings \$	405,915
Disallowances	81,239
Collections	324,676
Other	0
Total	324,676

EXPENSES

Total \$	445,532
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.6
Registered Nurses	1.2
Licensed Practical Nurses	0.1
Home Health Aides	0.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.1
Homemakers	4.4
Other Staff	3.0
TOTAL FTEs	16.3

Pierce County Home Care

412 West Kinne Street, Box 238

Ellsworth WI 54011

Pierce County

COUNTIES SERVED

Pierce

(715) 273-6756

License Number: 91

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 17

Number of unduplicated patients in 2000 = 110

TOTAL NUMBER OF ADMISSIONS 103**PERCENT ADMISSIONS FROM:**

Private Residences 39.8%

General Hospitals 41.7

Nursing Homes 16.5

Other 1.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 104

PERCENT DISCHARGES TO:

Private Residences 49.0%

General Hospitals 40.4

Nursing Homes 5.8

Deaths 3.8

Other 1.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	110	1,630	14.8
Home Health Aide	59	2,239	37.9
Physical Therapy	16	41	2.6
Spch/Occ/Resp Therapy	4	37	9.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	30	1,340	44.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,287	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 55.4%
4 to 24 0.9	Medicaid 19.4
25 to 54 10.9	Other Federal 1.4
55 to 64 6.4	State Funds 3.6
65 to 74 18.2	Private Insurance 5.0
75 to 84 48.2	Self Pay 15.1
85 & over 15.5	Other 0.0
	TOTAL PATIENTS 139

Males 31.8% Females 68.2 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS			
Infectious Disorders	1.8%	Digestive Disorders	0.9%
Cancer	5.5	Genitourinary Sys.	3.6
Diabetes	8.2	Preg. & Childbirth	0.0
Diseases of Blood	5.5	Arthropathies	6.4
Dementia/Alzheimers	0.9	Osteopathies	0.9
Psychoses/Neuroses	0.9	Perinatal Period	0.0
Central Nervous Sys.	2.7	Ill-Defined Cond.	6.4
Paralysis/CP	0.0	Fractures	10.0
Cardiovascular	29.1	Wounds, Burns	5.5
Stroke	1.8	Compl. of Surgery	0.0
Respiratory	8.2	Other Conditions	1.8

REVENUE

Billings	\$	396,778
Disallowances		188,222
Collections		208,556
Other		0
Total		208,556

EXPENSES

Total	\$	405,993
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.3
Licensed Practical Nurses	0.0
Home Health Aides	2.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.1
Homemakers	0.0
Other Staff	2.0
TOTAL FTEs	10.8

Spring Valley Healthcare Center Home Health Service

W500 - State Road 29

Spring Valley WI 54767

Pierce County

COUNTIES SERVED

Dunn

Pierce

St. Croix

(715) 778-5545

License Number: 349

Ownership of Agency: City

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 25

Number of unduplicated patients in 2000 = 120

TOTAL NUMBER OF ADMISSIONS 67**PERCENT ADMISSIONS FROM:**

Private Residences 83.6%

General Hospitals 4.5

Nursing Homes 9.0

Other 3.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 48

PERCENT DISCHARGES TO:

Private Residences 37.5%

General Hospitals 8.3

Nursing Homes 41.7

Deaths 8.3

Other 4.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	8	165	20.6
Home Health Aide	3	463	154.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	152	10,054	66.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	79	5,785	73.2
TOTAL	XXXXXXX	16,467	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 12.5	Medicaid 33.1
25 to 54 15.0	Other Federal 1.3
55 to 64 10.0	State Funds 52.3
65 to 74 18.3	Private Insurance 2.6
75 to 84 25.0	Self Pay 10.6
85 & over 19.2	Other 0.0
	TOTAL PATIENTS 151

Males 34.2% Females 65.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.8%
Cancer 5.8	Genitourinary Sys. 0.0
Diabetes 10.8	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 11.7
Dementia/Alzheimers 7.5	Osteopathies 0.0
Psychoses/Neuroses 3.3	Perinatal Period 1.7
Central Nervous Sys. 7.5	Ill-Defined Cond. 4.2
Paralysis/CP 4.2	Fractures 0.0
Cardiovascular 8.3	Wounds, Burns 2.5
Stroke 9.2	Compl. of Surgery 0.8
Respiratory 13.3	Other Conditions 8.3

REVENUE

Billings \$	556,149
Disallowances	109,632
Collections	446,517
Other	0
Total	446,517

EXPENSES

Total \$	512,206
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 0.9

Licensed Practical Nurses 0.0

Home Health Aides 0.3

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 17.7

Homemakers 6.6

Other Staff 1.0

TOTAL FTEs 28.4

Polk County Home Care Program

300 Polk County Plaza, Suite 10

Balsam Lake WI 54810

Polk County

COUNTIES SERVED

Polk

(715) 485-8500

License Number: 92

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 38

Number of unduplicated patients in 2000 = 381

TOTAL NUMBER OF ADMISSIONS 290**PERCENT ADMISSIONS FROM:**

Private Residences 25.2%

General Hospitals 52.8

Nursing Homes 21.7

Other 0.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 271

PERCENT DISCHARGES TO:

Private Residences 63.5%

General Hospitals 12.5

Nursing Homes 18.1

Deaths 3.3

Other 2.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	258	3,291	12.8
Home Health Aide	107	3,068	28.7
Physical Therapy	78	719	9.2
Spch/Occ/Resp Therapy	27	171	6.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	194	5,570	28.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	12,819	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 54.0%
4 to 24 2.6	Medicaid 23.0
25 to 54 5.2	Other Federal 2.3
55 to 64 7.1	State Funds 0.5
65 to 74 19.2	Private Insurance 8.3
75 to 84 35.7	Self Pay 11.9
85 & over 29.4	Other 0.0
	TOTAL PATIENTS 396

Males 37.0% Females 63.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 2.4%	Digestive Disorders 1.6%
Cancer 7.9	Genitourinary Sys. 3.7
Diabetes 5.5	Preg. & Childbirth 0.3
Diseases of Blood 0.5	Arthropathies 16.8
Dementia/Alzheimers 0.0	Osteopathies 5.2
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.6	Ill-Defined Cond. 4.2
Paralysis/CP 1.0	Fractures 5.2
Cardiovascular 23.6	Wounds, Burns 2.6
Stroke 3.1	Compl. of Surgery 2.6
Respiratory 9.2	Other Conditions 1.8

REVENUE

Billings \$	886,382
Disallowances	111,676
Collections	774,706
Other	4,120
Total	778,826

EXPENSES

Total \$	1,074,968
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.9
Licensed Practical Nurses	2.1
Home Health Aides	3.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.7
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	23.0

Community Health Resources

1133 South 4th Avenue, Box 110
Park Falls WI 54552

Price County

(715) 762-4600

COUNTIES SERVED

Ashland
Bayfield
Iron
Price
Sawyer

License Number: 27

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 40

Number of unduplicated patients in 2000 = 96

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	77	5,096	66.2
Home Health Aide	46	5,022	109.2
Physical Therapy	6	53	8.8
Spch/Occ/Resp Therapy	4	40	10.0
Medical Social Service	0	0	0.0
Private Duty Nursing	2	288	144.0
Personal Care/PC RN Supv.	71	9,633	135.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	20,132	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.1%	Medicare 24.5%
4 to 24 8.3	Medicaid 60.4
25 to 54 13.5	Other Federal 0.0
55 to 64 12.5	State Funds 0.0
65 to 74 15.6	Private Insurance 5.8
75 to 84 20.8	Self Pay 9.4
85 & over 27.1	Other 0.0
	TOTAL PATIENTS 139

Males 35.4% Females 64.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.0%	Digestive Disorders 4.2%
Cancer 2.1	Genitourinary Sys. 1.0
Diabetes 9.4	Preg. & Childbirth 0.0
Diseases of Blood 5.2	Arthropathies 5.2
Dementia/Alzheimers 4.2	Osteopathies 3.1
Psychoses/Neuroses 2.1	Perinatal Period 0.0
Central Nervous Sys. 4.2	Ill-Defined Cond. 3.1
Paralysis/CP 2.1	Fractures 5.2
Cardiovascular 19.8	Wounds, Burns 5.2
Stroke 4.2	Compl. of Surgery 0.0
Respiratory 5.2	Other Conditions 13.5

REVENUE

Billings	\$ 1,332,885
Disallowances	547,241
Collections	785,644
Other	263
Total	785,907

EXPENSES

Total	\$ 818,817
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TOTAL NUMBER OF ADMISSIONS 61

PERCENT ADMISSIONS FROM:

Private Residences	31.1%
General Hospitals	50.8
Nursing Homes	14.8
Other	3.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 68

PERCENT DISCHARGES TO:

Private Residences	38.2%
General Hospitals	55.9
Nursing Homes	4.4
Deaths	0.0
Other	1.5

STAFFING**FTEs**

Administrators	1.5
Reg. Nurse Supervisors	0.0
Registered Nurses	3.2
Licensed Practical Nurses	2.6
Home Health Aides	5.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	4.9
Homemakers	0.0
Other Staff	2.7
TOTAL FTEs	20.3

Supportive Home Services

PO Box 450-1181 North 4th Avenue

Park Falls WI 54552

Price County

(715) 762-3200

License Number: 202

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 29

Number of unduplicated patients in 2000 = 132

COUNTIES SERVED

Ashland

Iron

Price

Rusk

Sawyer

Taylor

Vilas

TOTAL NUMBER OF ADMISSIONS 151**PERCENT ADMISSIONS FROM:**

Private Residences 50.3%

General Hospitals 43.0

Nursing Homes 4.6

Other 2.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 138

PERCENT DISCHARGES TO:

Private Residences 54.3%

General Hospitals 34.8

Nursing Homes 3.6

Deaths 2.2

Other 5.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	112	2,851	25.5
Home Health Aide	64	4,698	73.4
Physical Therapy	27	326	12.1
Spch/Occ/Resp Therapy	12	88	7.3
Medical Social Service	11	29	2.6
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	42	5,470	130.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	13,462	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 74.0%
4 to 24 3.0	Medicaid 19.7
25 to 54 7.6	Other Federal 0.5
55 to 64 6.8	State Funds 0.5
65 to 74 22.0	Private Insurance 4.8
75 to 84 38.6	Self Pay 0.5
85 & over 22.0	Other 0.0
	TOTAL PATIENTS 208

Males 32.6% Females 67.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.8%	Digestive Disorders 6.1%
Cancer 3.0	Genitourinary Sys. 3.0
Diabetes 8.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 14.4
Dementia/Alzheimers 1.5	Osteopathies 1.5
Psychoses/Neuroses 0.8	Perinatal Period 0.0
Central Nervous Sys. 3.8	Ill-Defined Cond. 3.0
Paralysis/CP 2.3	Fractures 5.3
Cardiovascular 15.2	Wounds, Burns 6.8
Stroke 6.8	Compl. of Surgery 1.5
Respiratory 9.1	Other Conditions 6.8

REVENUE

Billings \$	768,360
Disallowances	142,245
Collections	626,115
Other	208
Total	626,323

EXPENSES

Total \$	624,689
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STAFFING**FTEs**

Administrators	2.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.1
Licensed Practical Nurses	0.0
Home Health Aides	3.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	3.8
Homemakers	0.0
Other Staff	2.6
TOTAL FTEs	16.4

Flambeau Home Health & Hospice

605 Peterson Drive
Phillips WI 54555

Price County

(715) 339-4371

COUNTIES SERVED

Ashland
Iron
Price
Sawyer
Washburn

License Number: 238

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 28

Number of unduplicated patients in 2000 = 331

TOTAL NUMBER OF ADMISSIONS 329

PERCENT ADMISSIONS FROM:

Private Residences	60.5%
General Hospitals	36.8
Nursing Homes	0.9
Other	1.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 404

PERCENT DISCHARGES TO:

Private Residences	49.8%
General Hospitals	38.4
Nursing Homes	1.5
Deaths	3.2
Other	7.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	245	4,275	17.4
Home Health Aide	95	4,653	49.0
Physical Therapy	83	760	9.2
Spch/Occ/Resp Therapy	20	242	12.1
Medical Social Service	29	146	5.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	168	10,412	62.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	25	1,450	58.0
TOTAL	XXXXXXX	21,938	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 61.0%
4 to 24 1.8	Medicaid 25.1
25 to 54 8.5	Other Federal 0.9
55 to 64 9.1	State Funds 2.1
65 to 74 19.6	Private Insurance 6.3
75 to 84 32.3	Self Pay 4.5
85 & over 28.7	Other 0.0
	TOTAL PATIENTS 331

Males 36.0% Females 64.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.5%	Digestive Disorders 4.2%
Cancer 9.4	Genitourinary Sys. 2.4
Diabetes 4.5	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 12.4
Dementia/Alzheimers 0.3	Osteopathies 1.2
Psychoses/Neuroses 0.9	Perinatal Period 0.0
Central Nervous Sys. 3.3	Ill-Defined Cond. 5.7
Paralysis/CP 1.5	Fractures 7.9
Cardiovascular 15.4	Wounds, Burns 5.4
Stroke 2.7	Compl. of Surgery 0.0
Respiratory 9.7	Other Conditions 10.6

REVENUE

Billings	\$ 1,263,866
Disallowances	353,590
Collections	910,276
Other	360
Total	910,636

EXPENSES

Total	\$ 1,165,336
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	7.0
Licensed Practical Nurses	0.0
Home Health Aides	6.8
Physical Therapists	0.0
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	1.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.8
Homemakers	0.5
Other Staff	5.3
TOTAL FTEs	24.4

Gentiva Health Services

1300 South Green Bay Road, Suite 205
Racine WI 53406 Racine County

(262) 636-9036

License Number: 3

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 120

Number of unduplicated patients in 2000 = 439

COUNTIES SERVED

Kenosha
Milwaukee
Racine
Walworth
Waukesha

TOTAL NUMBER OF ADMISSIONS 398

PERCENT ADMISSIONS FROM:

Private Residences	87.9%
General Hospitals	2.8
Nursing Homes	0.0
Other	9.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 402

PERCENT DISCHARGES TO:

Private Residences	81.6%
General Hospitals	6.5
Nursing Homes	3.0
Deaths	1.5
Other	7.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	372	4,226	11.4
Home Health Aide	51	5,185	101.7
Physical Therapy	98	696	7.1
Spch/Occ/Resp Therapy	57	363	6.4
Medical Social Service	5	9	1.8
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	24	6,946	289.4
Other Home Health Care	82	192	2.3
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	17,617	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 13.9%	Medicare 15.8%
4 to 24 5.5	Medicaid 20.6
25 to 54 34.4	Other Federal 0.0
55 to 64 16.4	State Funds 0.0
65 to 74 12.5	Private Insurance 53.9
75 to 84 9.8	Self Pay 9.7
85 & over 7.5	Other 0.0
	TOTAL PATIENTS 558

Males 49.7% Females 50.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 4.8%
Cancer 8.0	Genitourinary Sys. 2.5
Diabetes 2.7	Preg. & Childbirth 1.1
Diseases of Blood 1.1	Arthropathies 10.9
Dementia/Alzheimers 0.5	Osteopathies 0.0
Psychoses/Neuroses 1.1	Perinatal Period 7.5
Central Nervous Sys. 9.3	Ill-Defined Cond. 4.1
Paralysis/CP 0.0	Fractures 13.4
Cardiovascular 12.5	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.9
Respiratory 4.3	Other Conditions 14.4

REVENUE

Billings	\$ 1,882,643
Disallowances	439,093
Collections	1,443,550
Other	0
Total	1,443,550

EXPENSES

Total	\$ 1,485,067
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	9.5
Licensed Practical Nurses	10.5
Home Health Aides	24.0
Physical Therapists	1.0
Occupational Therapists	0.3
Speech Pathologists	0.3
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	5.1
TOTAL FTEs	51.7

SAI Home Health Care, Inc.

5200 Washington Avenue, Suite 227

Racine WI 53403

Racine County

(262) 632-5886

COUNTIES SERVED

Kenosha

Racine

Walworth

License Number: 305

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 17

Number of unduplicated patients in 2000 = 131

TOTAL NUMBER OF ADMISSIONS 183**PERCENT ADMISSIONS FROM:**

Private Residences 24.0%

General Hospitals 41.0

Nursing Homes 9.3

Other 25.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 179

PERCENT DISCHARGES TO:

Private Residences 67.6%

General Hospitals 22.3

Nursing Homes 2.8

Deaths 0.0

Other 7.3

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	103	2,724	26.4
Home Health Aide	90	5,177	57.5
Physical Therapy	73	649	8.9
Spch/Occ/Resp Therapy	36	231	6.4
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,781	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 50.7%
4 to 24 3.1	Medicaid 34.1
25 to 54 29.0	Other Federal 0.0
55 to 64 6.9	State Funds 1.4
65 to 74 16.8	Private Insurance 10.9
75 to 84 27.5	Self Pay 2.9
85 & over 16.8	Other 0.0
	TOTAL PATIENTS 138

Males 30.5% Females 69.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.8%
Cancer 2.3	Genitourinary Sys. 1.5
Diabetes 0.8	Preg. & Childbirth 0.0
Diseases of Blood 2.3	Arthropathies 2.3
Dementia/Alzheimers 0.8	Osteopathies 6.9
Psychoses/Neuroses 1.5	Perinatal Period 0.0
Central Nervous Sys. 10.7	Ill-Defined Cond. 0.8
Paralysis/CP 9.9	Fractures 8.4
Cardiovascular 9.9	Wounds, Burns 22.9
Stroke 6.1	Compl. of Surgery 0.0
Respiratory 6.9	Other Conditions 5.3

REVENUE

Billings \$	532,106
Disallowances	0
Collections	532,106
Other	2,106
Total	534,212

EXPENSES

Total \$	739,489
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.3
Licensed Practical Nurses	1.0
Home Health Aides	6.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTEs	15.6

Alpha Home Health Care

2101 Riverside Drive, Suite 1
Beloit WI 53511

Rock County

(608) 368-1214

COUNTIES SERVED

Dane
Jefferson
Rock
Walworth

License Number: 245

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 38

Number of unduplicated patients in 2000 = 88

TOTAL NUMBER OF ADMISSIONS 55

PERCENT ADMISSIONS FROM:

Private Residences	50.9%
General Hospitals	43.6
Nursing Homes	3.6
Other	1.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 66

PERCENT DISCHARGES TO:

Private Residences	63.6%
General Hospitals	21.2
Nursing Homes	4.5
Deaths	7.6
Other	3.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	69	4,698	68.1
Home Health Aide	20	3,862	193.1
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	22	1,707	77.6
Personal Care/PC RN Supv.	102	9,280	91.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	19,547	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 29.2%
4 to 24 20.5	Medicaid 34.9
25 to 54 22.7	Other Federal 0.9
55 to 64 9.1	State Funds 0.0
65 to 74 21.6	Private Insurance 19.8
75 to 84 17.0	Self Pay 15.1
85 & over 9.1	Other 0.0
	TOTAL PATIENTS 106

Males 48.9% Females 51.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 6.8%
Cancer 9.1	Genitourinary Sys. 2.3
Diabetes 1.1	Preg. & Childbirth 1.1
Diseases of Blood 1.1	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 3.4
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 6.8	Ill-Defined Cond. 2.3
Paralysis/CP 11.4	Fractures 3.4
Cardiovascular 11.4	Wounds, Burns 4.5
Stroke 6.8	Compl. of Surgery 1.1
Respiratory 9.1	Other Conditions 17.0

REVENUE

Billings	\$ 2,130,336
Disallowances	335,896
Collections	1,794,440
Other	0
Total	1,794,440

EXPENSES

Total	\$ 1,732,882
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	2.7
Licensed Practical Nurses	5.9
Home Health Aides	1.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	24.7
Homemakers	0.0
Other Staff	3.5
TOTAL FTEs	39.3

At-Home Healthcare

1969 West Hart Road
Beloit WI 53511

Rock County

COUNTIES SERVED

Green
Rock
Walworth

(608) 363-5885

License Number: 98

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 20

Number of unduplicated patients in 2000 = 479

TOTAL NUMBER OF ADMISSIONS 470

PERCENT ADMISSIONS FROM:

Private Residences	19.4%
General Hospitals	71.3
Nursing Homes	4.9
Other	4.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	412	5,917	14.4
Home Health Aide	60	2,502	41.7
Physical Therapy	114	781	6.9
Spch/Occ/Resp Therapy	32	349	10.9
Medical Social Service	16	22	1.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	9,571	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 470

PERCENT DISCHARGES TO:

Private Residences	70.2%
General Hospitals	17.4
Nursing Homes	1.7
Deaths	3.2
Other	7.4

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.5%	Medicare 67.6%
4 to 24 4.2	Medicaid 7.4
25 to 54 17.1	Other Federal 0.0
55 to 64 10.4	State Funds 1.0
65 to 74 22.5	Private Insurance 21.5
75 to 84 29.6	Self Pay 1.9
85 & over 14.6	Other 0.6
	TOTAL PATIENTS 484

Males 42.4% Females 57.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.2%	Digestive Disorders 6.3%
Cancer 7.1	Genitourinary Sys. 5.0
Diabetes 3.5	Preg. & Childbirth 0.4
Diseases of Blood 3.8	Arthropathies 7.9
Dementia/Alzheimers 0.4	Osteopathies 1.7
Psychoses/Neuroses 0.2	Perinatal Period 0.0
Central Nervous Sys. 5.0	Ill-Defined Cond. 4.4
Paralysis/CP 1.5	Fractures 5.2
Cardiovascular 15.0	Wounds, Burns 2.1
Stroke 3.5	Compl. of Surgery 4.8
Respiratory 8.1	Other Conditions 13.8

REVENUE

Billings \$	868,791
Disallowances	81,969
Collections	786,822
Other	0
Total	786,822

EXPENSES

Total \$	1,096,295
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	5.5
Licensed Practical Nurses	0.0
Home Health Aides	2.4
Physical Therapists	0.8
Occupational Therapists	0.1
Speech Pathologists	0.1
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.0
TOTAL FTEs	12.9

Memorial Community Hospital Home Health Agency

1011 North Main Street

Edgerton WI 53534

Rock County

(608) 884-4910

COUNTIES SERVED

Dane

Jefferson

Rock

License Number: 159

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 25

Number of unduplicated patients in 2000 = 301

TOTAL NUMBER OF ADMISSIONS 280**PERCENT ADMISSIONS FROM:**

Private Residences 12.9%

General Hospitals 53.9

Nursing Homes 10.0

Other 23.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	256	5,180	20.2
Home Health Aide	95	1,623	17.1
Physical Therapy	81	705	8.7
Spch/Occ/Resp Therapy	24	122	5.1
Medical Social Service	20	41	2.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	18	560	31.1
Other Home Health Care	18	205	11.4
Homemkr & Other Non HH	49	1,773	36.2
TOTAL	XXXXXXX	10,209	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 304

PERCENT DISCHARGES TO:

Private Residences 74.0%

General Hospitals 13.5

Nursing Homes 1.6

Deaths 4.6

Other 6.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 71.8%
4 to 24 0.0	Medicaid 4.7
25 to 54 5.6	Other Federal 0.3
55 to 64 5.3	State Funds 4.0
65 to 74 16.3	Private Insurance 5.3
75 to 84 34.9	Self Pay 14.0
85 & over 37.9	Other 0.0
	TOTAL PATIENTS 301

Males 34.6% Females 65.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 2.3%	Digestive Disorders 2.3%
Cancer 4.0	Genitourinary Sys. 3.0
Diabetes 5.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 8.0
Dementia/Alzheimers 9.0	Osteopathies 0.7
Psychoses/Neuroses 0.3	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 1.7	Fractures 5.6
Cardiovascular 20.3	Wounds, Burns 5.0
Stroke 2.7	Compl. of Surgery 0.0
Respiratory 12.6	Other Conditions 17.3

REVENUE

Billings \$	796,682
Disallowances	76,975
Collections	719,707
Other	0
Total	719,707

EXPENSES

Total \$	605,467
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.6
Licensed Practical Nurses	0.9
Home Health Aides	1.6
Physical Therapists	0.3
Occupational Therapists	0.2
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.6
Homemakers	1.1
Other Staff	1.0
TOTAL FTEs	12.2

Mercy Assisted Care, Inc.

901 Mineral Point Avenue
Janesville WI 53545

Rock County

(608) 754-2201

COUNTIES SERVED

Dane
Green
Rock
Walworth

License Number: 99

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 81

Number of unduplicated patients in 2000 = 954

TOTAL NUMBER OF ADMISSIONS 936

PERCENT ADMISSIONS FROM:

Private Residences	11.0%
General Hospitals	61.8
Nursing Homes	6.6
Other	20.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	870	10,904	12.5
Home Health Aide	319	10,519	33.0
Physical Therapy	377	2,521	6.7
Spch/Occ/Resp Therapy	187	1,378	7.4
Medical Social Service	84	93	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	194	11,037	56.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	134	14,556	108.6
TOTAL	XXXXXXX	51,008	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 949

PERCENT DISCHARGES TO:

Private Residences	66.2%
General Hospitals	22.1
Nursing Homes	4.0
Deaths	2.1
Other	5.6

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.6%	Medicare 55.8%
4 to 24 1.2	Medicaid 12.7
25 to 54 11.4	Other Federal 0.1
55 to 64 10.7	State Funds 6.5
65 to 74 20.2	Private Insurance 10.0
75 to 84 32.9	Self Pay 9.1
85 & over 23.0	Other 5.8
	TOTAL PATIENTS 1,193

Males 36.2% Females 63.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.3%	Digestive Disorders 3.1%
Cancer 7.1	Genitourinary Sys. 3.8
Diabetes 2.8	Preg. & Childbirth 0.1
Diseases of Blood 2.8	Arthropathies 16.1
Dementia/Alzheimers 0.7	Osteopathies 1.3
Psychoses/Neuroses 1.3	Perinatal Period 0.2
Central Nervous Sys. 0.8	Ill-Defined Cond. 9.1
Paralysis/CP 2.0	Fractures 6.9
Cardiovascular 12.4	Wounds, Burns 8.0
Stroke 3.8	Compl. of Surgery 1.3
Respiratory 11.1	Other Conditions 4.9

REVENUE

Billings	\$ 2,834,063
Disallowances	-714,125
Collections	3,548,188
Other	45,788
Total	3,593,976

EXPENSES

Total	\$ 2,924,396
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	12.9
Licensed Practical Nurses	0.0
Home Health Aides	14.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.8
Other Therapeutic Staff	0.0
Personal Care Workers	15.9
Homemakers	2.3
Other Staff	12.8
TOTAL FTEs	62.0

Indianhead Home Health Care Agency

209 East Third Street South, Box 10

Ladysmith WI 54848

Rusk County

(715) 532-5594

License Number: 295

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 7

Number of unduplicated patients in 2000 = 121

COUNTIES SERVED

Barron

Burnett

Polk

Rusk

St. Croix

Washburn

TOTAL NUMBER OF ADMISSIONS 94**PERCENT ADMISSIONS FROM:**

Private Residences 41.5%

General Hospitals 46.8

Nursing Homes 10.6

Other 1.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 113

PERCENT DISCHARGES TO:

Private Residences 37.2%

General Hospitals 54.0

Nursing Homes 8.0

Deaths 0.9

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	119	1,955	16.4
Home Health Aide	31	2,113	68.2
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	24	1,083	45.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,151	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 29.8%
4 to 24 0.8	Medicaid 51.9
25 to 54 9.9	Other Federal 5.3
55 to 64 7.4	State Funds 0.0
65 to 74 19.8	Private Insurance 13.0
75 to 84 38.0	Self Pay 0.0
85 & over 24.0	Other 0.0
	TOTAL PATIENTS 131

Males 25.6% Females 74.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 1.7%
Cancer 3.3	Genitourinary Sys. 3.3
Diabetes 14.9	Preg. & Childbirth 0.0
Diseases of Blood 0.8	Arthropathies 5.0
Dementia/Alzheimers 6.6	Osteopathies 0.0
Psychoses/Neuroses 4.1	Perinatal Period 0.0
Central Nervous Sys. 3.3	Ill-Defined Cond. 5.8
Paralysis/CP 5.8	Fractures 3.3
Cardiovascular 20.7	Wounds, Burns 2.5
Stroke 4.1	Compl. of Surgery 0.8
Respiratory 5.8	Other Conditions 8.3

REVENUE

Billings \$	414,478
Disallowances	127,861
Collections	286,617
Other	0
Total	286,617

EXPENSES

Total \$	284,460
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.5
Registered Nurses	0.7
Licensed Practical Nurses	0.0
Home Health Aides	0.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.8
Homemakers	0.0
Other Staff	0.4
TOTAL FTEs	4.0

Rusk County Home Health Care

311 Miner Avenue East, Suite C220

Ladysmith WI 54848

Rusk County

COUNTIES SERVED

Rusk

(715) 532-2299

License Number: 100

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 9

Number of unduplicated patients in 2000 = 158

TOTAL NUMBER OF ADMISSIONS 195**PERCENT ADMISSIONS FROM:**

Private Residences 23.6%

General Hospitals 65.6

Nursing Homes 7.2

Other 3.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 188

PERCENT DISCHARGES TO:

Private Residences 65.4%

General Hospitals 23.9

Nursing Homes 3.7

Deaths 6.4

Other 0.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	158	2,268	14.4
Home Health Aide	82	1,514	18.5
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,782	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.3%	Medicare 81.6%
4 to 24 0.0	Medicaid 7.6
25 to 54 11.4	Other Federal 3.8
55 to 64 5.7	State Funds 0.0
65 to 74 23.4	Private Insurance 7.0
75 to 84 24.1	Self Pay 0.0
85 & over 34.2	Other 0.0
	TOTAL PATIENTS 158

Males 42.4% Females 57.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.6%	Digestive Disorders 0.0%
Cancer 12.0	Genitourinary Sys. 7.0
Diabetes 7.0	Preg. & Childbirth 0.0
Diseases of Blood 1.9	Arthropathies 7.6
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.9	Ill-Defined Cond. 0.0
Paralysis/CP 0.6	Fractures 13.3
Cardiovascular 15.2	Wounds, Burns 19.6
Stroke 1.9	Compl. of Surgery 0.0
Respiratory 11.4	Other Conditions 0.0

REVENUE

Billings \$	342,866
Disallowances	26,081
Collections	316,785
Other	91,148
Total	407,933

EXPENSES

Total \$	427,123
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	4.1
Licensed Practical Nurses	0.0
Home Health Aides	1.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.0
TOTAL FTEs	10.4

Heartland Home Health

455 Davis Street, PO Box 487
Hammond WI 54015

St. Croix County

(715) 796-2223

COUNTIES SERVED

Dunn
Pierce
Polk
St. Croix

License Number: 128
Ownership of Agency: Nonprofit Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? Yes
Number of patients visited on 12/7/2000 = 16
Number of unduplicated patients in 2000 = 274

TOTAL NUMBER OF ADMISSIONS 253

PERCENT ADMISSIONS FROM:

Private Residences 18.2%
General Hospitals 71.1
Nursing Homes 9.9
Other 0.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	274	4,547	16.6
Home Health Aide	75	1,202	16.0
Physical Therapy	97	571	5.9
Spch/Occ/Resp Therapy	49	212	4.3
Medical Social Service	2	3	1.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	6,535	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 251

PERCENT DISCHARGES TO:

Private Residences 85.3%
General Hospitals 6.0
Nursing Homes 2.0
Deaths 3.2
Other 3.6

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.1%	Medicare 74.6%
4 to 24 0.7	Medicaid 2.4
25 to 54 12.8	Other Federal 1.4
55 to 64 9.1	State Funds 0.0
65 to 74 17.9	Private Insurance 21.7
75 to 84 42.3	Self Pay 0.0
85 & over 16.1	Other 0.0
	TOTAL PATIENTS 295

Males 39.1% Females 60.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 4.0%
Cancer 6.9	Genitourinary Sys. 3.6
Diabetes 1.8	Preg. & Childbirth 0.0
Diseases of Blood 0.7	Arthropathies 12.0
Dementia/Alzheimers 0.0	Osteopathies 2.2
Psychoses/Neuroses 0.0	Perinatal Period 0.4
Central Nervous Sys. 1.8	Ill-Defined Cond. 6.2
Paralysis/CP 1.5	Fractures 8.8
Cardiovascular 23.4	Wounds, Burns 4.0
Stroke 3.6	Compl. of Surgery 3.6
Respiratory 8.8	Other Conditions 6.6

REVENUE

Billings \$	763,166
Disallowances	136,573
Collections	626,593
Other	0
Total	626,593

EXPENSES

Total \$	694,434
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.6
Registered Nurses	5.2
Licensed Practical Nurses	0.8
Home Health Aides	1.0
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.5
TOTAL FTEs	12.2

REM Health of Wisconsin, Inc.

1007 Washington Avenue
Baraboo WI 53913

Sauk County

(608) 356-7570

License Number: 36

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 136

Number of unduplicated patients in 2000 = 298

COUNTIES SERVED

Adams

Columbia

Dane

Dodge

Iowa

Juneau

Marquette

Sauk

TOTAL NUMBER OF ADMISSIONS 260

PERCENT ADMISSIONS FROM:

Private Residences 23.5%

General Hospitals 50.0

Nursing Homes 8.5

Other 18.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 233

PERCENT DISCHARGES TO:

Private Residences 44.2%

General Hospitals 27.9

Nursing Homes 4.7

Deaths 2.6

Other 20.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	277	4,454	16.1
Home Health Aide	113	10,434	92.3
Physical Therapy	60	540	9.0
Spch/Occ/Resp Therapy	10	185	18.5
Medical Social Service	0	0	0.0
Private Duty Nursing	14	3,060	218.6
Personal Care/PC RN Supv.	245	15,331	62.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	34,004	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.4%	Medicare 28.1%
4 to 24 4.4	Medicaid 55.0
25 to 54 14.1	Other Federal 0.0
55 to 64 11.7	State Funds 0.0
65 to 74 19.1	Private Insurance 16.4
75 to 84 22.1	Self Pay 0.6
85 & over 23.2	Other 0.0
	TOTAL PATIENTS 342

Males 31.2% Females 68.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 2.0%
Cancer 5.0	Genitourinary Sys. 1.0
Diabetes 7.0	Preg. & Childbirth 0.3
Diseases of Blood 4.4	Arthropathies 1.7
Dementia/Alzheimers 7.0	Osteopathies 4.0
Psychoses/Neuroses 4.7	Perinatal Period 0.7
Central Nervous Sys. 7.0	Ill-Defined Cond. 0.0
Paralysis/CP 3.0	Fractures 5.4
Cardiovascular 13.4	Wounds, Burns 9.7
Stroke 3.0	Compl. of Surgery 2.7
Respiratory 6.7	Other Conditions 10.4

REVENUE

Billings \$	3,074,515
Disallowances	859,890
Collections	2,214,625
Other	0
Total	2,214,625

EXPENSES

Total \$	2,250,306
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STAFFING**FTEs**

Administrators 0.8

Reg. Nurse Supervisors 4.5

Registered Nurses 13.2

Licensed Practical Nurses 6.7

Home Health Aides 5.6

Physical Therapists 0.7

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 13.3

Homemakers 0.0

Other Staff 7.0

TOTAL FTEs 51.7

Sauk County Health Department505 Broadway
Baraboo WI 53913

Sauk County

COUNTIES SERVED

Sauk

(608) 355-3290

License Number: 102
 Ownership of Agency: County
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 9
 Number of unduplicated patients in 2000 = 134

TOTAL NUMBER OF ADMISSIONS 134**PERCENT ADMISSIONS FROM:**

Private Residences 18.7%
 General Hospitals 43.3
 Nursing Homes 11.2
 Other 26.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	134	2,719	20.3
Home Health Aide	71	2,758	38.8
Physical Therapy	29	325	11.2
Spch/Occ/Resp Therapy	6	55	9.2
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,857	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 143

PERCENT DISCHARGES TO:

Private Residences 46.2%
 General Hospitals 30.1
 Nursing Homes 2.1
 Deaths 3.5
 Other 18.2

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 58.7%
4 to 24 1.5	Medicaid 22.6
25 to 54 11.9	Other Federal 0.0
55 to 64 11.2	State Funds 2.6
65 to 74 13.4	Private Insurance 3.2
75 to 84 32.8	Self Pay 9.0
85 & over 26.9	Other 3.9
	TOTAL PATIENTS 155

Males 36.6% Females 63.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 3.0%	Digestive Disorders 6.7%
Cancer 8.2	Genitourinary Sys. 2.2
Diabetes 6.0	Preg. & Childbirth 0.0
Diseases of Blood 4.5	Arthropathies 12.7
Dementia/Alzheimers 0.0	Osteopathies 1.5
Psychoses/Neuroses 2.2	Perinatal Period 0.0
Central Nervous Sys. 1.5	Ill-Defined Cond. 3.7
Paralysis/CP 0.7	Fractures 10.4
Cardiovascular 20.1	Wounds, Burns 6.7
Stroke 0.7	Compl. of Surgery 0.7
Respiratory 3.7	Other Conditions 4.5

REVENUE

Billings \$	413,146
Disallowances	68,891
Collections	344,255
Other	28,464
Total	372,719

EXPENSES

Total \$	586,359
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.0
Licensed Practical Nurses	0.0
Home Health Aides	1.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.7
TOTAL FTEs	9.4

Sawyer County Home Health

105 East 4th Street

Hayward WI 54843

Sawyer County

COUNTIES SERVED

Sawyer

(715) 634-4806

License Number: 103

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 16

Number of unduplicated patients in 2000 = 153

TOTAL NUMBER OF ADMISSIONS 137**PERCENT ADMISSIONS FROM:**

Private Residences 26.3%

General Hospitals 66.4

Nursing Homes 6.6

Other 0.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 128

PERCENT DISCHARGES TO:

Private Residences 78.1%

General Hospitals 5.5

Nursing Homes 6.3

Deaths 4.7

Other 5.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	148	1,458	9.9
Home Health Aide	61	1,893	31.0
Physical Therapy	67	1,376	20.5
Spch/Occ/Resp Therapy	5	51	10.2
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,778	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 78.4%
4 to 24 2.0	Medicaid 13.1
25 to 54 5.9	Other Federal 2.0
55 to 64 5.9	State Funds 0.0
65 to 74 25.5	Private Insurance 6.5
75 to 84 28.1	Self Pay 0.0
85 & over 32.7	Other 0.0
	TOTAL PATIENTS 153

Males 47.7% Females 52.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 0.7%
Cancer 7.2	Genitourinary Sys. 2.0
Diabetes 9.8	Preg. & Childbirth 0.0
Diseases of Blood 3.3	Arthropathies 14.4
Dementia/Alzheimers 0.7	Osteopathies 2.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.7	Ill-Defined Cond. 5.2
Paralysis/CP 3.9	Fractures 16.3
Cardiovascular 15.7	Wounds, Burns 3.3
Stroke 2.0	Compl. of Surgery 0.0
Respiratory 5.2	Other Conditions 7.2

REVENUE

Billings \$	523,779
Disallowances	58,773
Collections	465,006
Other	0
Total	465,006

EXPENSES

Total \$	443,508
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.8
Licensed Practical Nurses	0.0
Home Health Aides	2.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.5
TOTAL FTEs	9.2

Shawano Community Home Care

309 North Bartlette Street

Shawano WI 54166

Shawano County

(715) 514-2169

COUNTIES SERVED

Marathon

Menominee

Oconto

Shawano

Waupaca

License Number: 104

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 28

Number of unduplicated patients in 2000 = 230

TOTAL NUMBER OF ADMISSIONS 217**PERCENT ADMISSIONS FROM:**

Private Residences 19.4%

General Hospitals 69.1

Nursing Homes 11.1

Other 0.5

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 211

PERCENT DISCHARGES TO:

Private Residences 77.7%

General Hospitals 12.8

Nursing Homes 2.8

Deaths 1.9

Other 4.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	230	2,059	9.0
Home Health Aide	82	1,883	23.0
Physical Therapy	51	463	9.1
Spch/Occ/Resp Therapy	26	282	10.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	66	3,721	56.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,408	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 67.5%
4 to 24 2.6	Medicaid 12.9
25 to 54 14.8	Other Federal 0.0
55 to 64 12.6	State Funds 0.0
65 to 74 25.2	Private Insurance 16.7
75 to 84 30.9	Self Pay 2.1
85 & over 11.7	Other 0.8
	TOTAL PATIENTS 240

Males 58.3% Females 41.7 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.4%	Digestive Disorders 7.8%
Cancer 12.2	Genitourinary Sys. 4.3
Diabetes 4.8	Preg. & Childbirth 0.0
Diseases of Blood 1.7	Arthropathies 6.1
Dementia/Alzheimers 0.4	Osteopathies 1.7
Psychoses/Neuroses 1.3	Perinatal Period 0.0
Central Nervous Sys. 2.6	Ill-Defined Cond. 3.0
Paralysis/CP 4.8	Fractures 6.1
Cardiovascular 18.7	Wounds, Burns 7.4
Stroke 1.7	Compl. of Surgery 1.3
Respiratory 7.4	Other Conditions 6.1

REVENUE

Billings \$	555,625
Disallowances	166,417
Collections	389,208
Other	0
Total	389,208

EXPENSES

Total \$	549,108
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STAFFING**FTEs**

Administrators	0.5
Reg. Nurse Supervisors	0.5
Registered Nurses	4.1
Licensed Practical Nurses	0.0
Home Health Aides	6.4
Physical Therapists	0.6
Occupational Therapists	0.2
Speech Pathologists	0.3
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	2.3
TOTAL FTEs	14.8

Community Home Nursing

1601 North Taylor Drive
Sheboygan WI 53081

Sheboygan County

(920) 457-5770

COUNTIES SERVED

Calumet
Manitowoc
Outagamie
Sheboygan

License Number: 124
Ownership of Agency: Nonprofit Church
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 55
Number of unduplicated patients in 2000 = 599

TOTAL NUMBER OF ADMISSIONS 649

PERCENT ADMISSIONS FROM:

Private Residences	31.9%
General Hospitals	61.6
Nursing Homes	5.5
Other	0.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 653

PERCENT DISCHARGES TO:

Private Residences	63.9%
General Hospitals	27.9
Nursing Homes	3.2
Deaths	0.9
Other	4.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	425	8,920	21.0
Home Health Aide	151	5,670	37.5
Physical Therapy	60	1,090	18.2
Spch/Occ/Resp Therapy	16	296	18.5
Medical Social Service	11	109	9.9
Private Duty Nursing	1	398	398.0
Personal Care/PC RN Supv.	55	5,559	101.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	45	1,438	32.0
TOTAL	XXXXXXX	23,480	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.7%	Medicare 69.6%
4 to 24 3.0	Medicaid 8.4
25 to 54 11.5	Other Federal 0.0
55 to 64 11.5	State Funds 2.8
65 to 74 17.2	Private Insurance 14.1
75 to 84 35.4	Self Pay 5.1
85 & over 20.7	Other 0.0
	TOTAL PATIENTS 822

Males 38.2% Females 61.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.5%	Digestive Disorders 7.7%
Cancer 7.5	Genitourinary Sys. 5.3
Diabetes 2.5	Preg. & Childbirth 0.2
Diseases of Blood 0.5	Arthropathies 10.5
Dementia/Alzheimers 0.0	Osteopathies 0.5
Psychoses/Neuroses 0.5	Perinatal Period 0.3
Central Nervous Sys. 1.5	Ill-Defined Cond. 5.8
Paralysis/CP 1.7	Fractures 6.3
Cardiovascular 20.2	Wounds, Burns 2.8
Stroke 4.3	Compl. of Surgery 0.7
Respiratory 8.8	Other Conditions 10.7

REVENUE

Billings	\$ 1,413,018
Disallowances	267,393
Collections	1,145,625
Other	84,522
Total	1,230,147

EXPENSES

Total	\$ 2,094,199
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	9.0
Licensed Practical Nurses	0.9
Home Health Aides	6.2
Physical Therapists	0.5
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	5.1
Homemakers	1.2
Other Staff	8.0
TOTAL FTEs	32.2

Taylor County Health Department

224 South 2nd Street

Medford WI 54451

Taylor County

COUNTIES SERVED

Taylor

(715) 748-1410

License Number: 106

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 17

Number of unduplicated patients in 2000 = 124

TOTAL NUMBER OF ADMISSIONS 85**PERCENT ADMISSIONS FROM:**

Private Residences 28.2%

General Hospitals 67.1

Nursing Homes 3.5

Other 1.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 96

PERCENT DISCHARGES TO:

Private Residences 55.2%

General Hospitals 7.3

Nursing Homes 17.7

Deaths 0.0

Other 19.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	114	2,400	21.1
Home Health Aide	43	1,396	32.5
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	21	418	19.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,214	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 76.9%
4 to 24 0.0	Medicaid 9.2
25 to 54 2.4	Other Federal 0.0
55 to 64 4.0	State Funds 0.0
65 to 74 8.1	Private Insurance 4.6
75 to 84 35.5	Self Pay 9.2
85 & over 50.0	Other 0.0
	TOTAL PATIENTS 130

Males 35.5% Females 64.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 1.6%
Cancer 6.5	Genitourinary Sys. 3.2
Diabetes 3.2	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 8.9
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.8	Ill-Defined Cond. 4.0
Paralysis/CP 0.0	Fractures 9.7
Cardiovascular 33.9	Wounds, Burns 0.8
Stroke 5.6	Compl. of Surgery 2.4
Respiratory 4.0	Other Conditions 15.3

REVENUE

Billings \$	296,103
Disallowances	0
Collections	296,103
Other	0
Total	296,103

EXPENSES

Total \$	298,840
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.0
Registered Nurses	3.8
Licensed Practical Nurses	0.0
Home Health Aides	1.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	7.1

Trempealeau County Health Department

Courthouse

Whitehall WI 54773

Trempealeau County

COUNTIES SERVED

Trempealeau

(715) 538-2311

License Number: 107

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 36

TOTAL NUMBER OF ADMISSIONS 19**PERCENT ADMISSIONS FROM:**

Private Residences	36.8%
General Hospitals	42.1
Nursing Homes	21.1
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 19

PERCENT DISCHARGES TO:

Private Residences	15.8%
General Hospitals	31.6
Nursing Homes	52.6
Deaths	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	35	529	15.1
Home Health Aide	3	27	9.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	35	981	28.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,537	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 12.5%
4 to 24 0.0	Medicaid 22.5
25 to 54 8.3	Other Federal 47.5
55 to 64 5.6	State Funds 2.5
65 to 74 19.4	Private Insurance 2.5
75 to 84 41.7	Self Pay 12.5
85 & over 25.0	Other 0.0
	TOTAL PATIENTS 40

Males 30.6% Females 69.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 2.8	Genitourinary Sys. 0.0
Diabetes 11.1	Preg. & Childbirth 0.0
Diseases of Blood 2.8	Arthropathies 33.3
Dementia/Alzheimers 0.0	Osteopathies 5.6
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.8	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 30.6	Wounds, Burns 2.8
Stroke 5.6	Compl. of Surgery 0.0
Respiratory 2.8	Other Conditions 0.0

REVENUE

Billings \$	32,656
Disallowances	24,060
Collections	8,596
Other	0
Total	8,596

EXPENSES

Total \$	154,070
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	0.2
Registered Nurses	1.0
Licensed Practical Nurses	0.0
Home Health Aides	0.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.9
TOTAL FTEs	3.1

Vernon Memorial Hospital Home Health Care Agency

507 South Main Street

Viroqua WI 54665

Vernon County

(608) 637-4362

COUNTIES SERVED

Crawford

Monroe

Richland

Vernon

License Number: 271

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 5

Number of unduplicated patients in 2000 = 145

TOTAL NUMBER OF ADMISSIONS 157**PERCENT ADMISSIONS FROM:**

Private Residences 19.7%

General Hospitals 73.2

Nursing Homes 5.7

Other 1.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 156

PERCENT DISCHARGES TO:

Private Residences 72.4%

General Hospitals 20.5

Nursing Homes 2.6

Deaths 1.3

Other 3.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	145	1,335	9.2
Home Health Aide	45	514	11.4
Physical Therapy	55	203	3.7
Spch/Occ/Resp Therapy	14	61	4.4
Medical Social Service	18	20	1.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,133	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 78.6%
4 to 24 4.8	Medicaid 4.1
25 to 54 8.3	Other Federal 0.0
55 to 64 8.3	State Funds 0.0
65 to 74 23.4	Private Insurance 12.4
75 to 84 36.6	Self Pay 4.1
85 & over 18.6	Other 0.7
	TOTAL PATIENTS 145

Males 35.9% Females 64.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 4.1%	Digestive Disorders 4.8%
Cancer 4.8	Genitourinary Sys. 4.1
Diabetes 6.2	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 13.1
Dementia/Alzheimers 0.7	Osteopathies 1.4
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 1.4	Ill-Defined Cond. 2.8
Paralysis/CP 0.0	Fractures 8.3
Cardiovascular 20.0	Wounds, Burns 1.4
Stroke 2.8	Compl. of Surgery 4.1
Respiratory 13.1	Other Conditions 6.9

REVENUE

Billings \$	182,268
Disallowances	13,844
Collections	168,424
Other	0
Total	168,424

EXPENSES

Total \$	192,480
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.5
Registered Nurses	1.6
Licensed Practical Nurses	0.0
Home Health Aides	0.6
Physical Therapists	0.3
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTEs	4.8

Home Care Network, Inc.

Hwy H, North, PO Box 384
Lake Geneva WI 53147

Walworth County

COUNTIES SERVED

Walworth

(262) 248-0457

License Number: 125

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 8

Number of unduplicated patients in 2000 = 72

TOTAL NUMBER OF ADMISSIONS 61

PERCENT ADMISSIONS FROM:

Private Residences	42.6%
General Hospitals	29.5
Nursing Homes	14.8
Other	13.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	72	2,107	29.3
Home Health Aide	12	238	19.8
Physical Therapy	33	369	11.2
Spch/Occ/Resp Therapy	17	108	6.4
Medical Social Service	17	255	15.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,077	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 63

PERCENT DISCHARGES TO:

Private Residences	63.5%
General Hospitals	15.9
Nursing Homes	9.5
Deaths	6.3
Other	4.8

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 83.8%
4 to 24 0.0	Medicaid 2.7
25 to 54 8.3	Other Federal 1.4
55 to 64 9.7	State Funds 0.0
65 to 74 23.6	Private Insurance 10.8
75 to 84 26.4	Self Pay 1.4
85 & over 31.9	Other 0.0
	TOTAL PATIENTS 74

Males 50.0% Females 50.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 4.2%	Digestive Disorders 4.2%
Cancer 12.5	Genitourinary Sys. 1.4
Diabetes 5.6	Preg. & Childbirth 0.0
Diseases of Blood 1.4	Arthropathies 15.3
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 1.4	Perinatal Period 0.0
Central Nervous Sys. 5.6	Ill-Defined Cond. 0.0
Paralysis/CP 1.4	Fractures 9.7
Cardiovascular 15.3	Wounds, Burns 2.8
Stroke 1.4	Compl. of Surgery 2.8
Respiratory 11.1	Other Conditions 4.2

REVENUE

Billings \$	275,611
Disallowances	0
Collections	275,611
Other	0
Total	275,611

EXPENSES

Total \$	299,418
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.9
Registered Nurses	1.5
Licensed Practical Nurses	0.3
Home Health Aides	0.2
Physical Therapists	0.2
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.8
TOTAL FTEs	6.0

Hearts of Gold, Inc.

38 West 5th Avenue, PO Box 220
Shell Lake WI 54871

Washburn County

(715) 468-2931

COUNTIES SERVED

Barron
Burnett
Pierce
Sawyer
Washburn

License Number: 304

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 28

Number of unduplicated patients in 2000 = 122

TOTAL NUMBER OF ADMISSIONS 107

PERCENT ADMISSIONS FROM:

Private Residences	34.6%
General Hospitals	50.5
Nursing Homes	3.7
Other	11.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	122	2,284	18.7
Home Health Aide	71	2,065	29.1
Physical Therapy	15	61	4.1
Spch/Occ/Resp Therapy	7	37	5.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	2	37	18.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,484	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 121

PERCENT DISCHARGES TO:

Private Residences	71.9%
General Hospitals	13.2
Nursing Homes	5.8
Deaths	6.6
Other	2.5

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.6%	Medicare 60.1%
4 to 24 4.9	Medicaid 22.3
25 to 54 10.7	Other Federal 4.1
55 to 64 6.6	State Funds 0.0
65 to 74 10.7	Private Insurance 6.8
75 to 84 38.5	Self Pay 0.7
85 & over 27.0	Other 6.1
	TOTAL PATIENTS 148

Males 32.8% Females 67.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 4.1%	Digestive Disorders 4.1%
Cancer 7.4	Genitourinary Sys. 2.5
Diabetes 2.5	Preg. & Childbirth 0.0
Diseases of Blood 1.6	Arthropathies 13.9
Dementia/Alzheimers 0.0	Osteopathies 3.3
Psychoses/Neuroses 1.6	Perinatal Period 1.6
Central Nervous Sys. 1.6	Ill-Defined Cond. 2.5
Paralysis/CP 0.0	Fractures 4.9
Cardiovascular 18.0	Wounds, Burns 4.1
Stroke 4.9	Compl. of Surgery 0.8
Respiratory 9.0	Other Conditions 11.5

REVENUE

Billings \$	438,720
Disallowances	98,350
Collections	340,370
Other	75
Total	340,445

EXPENSES

Total \$	603,838
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	0.8
Registered Nurses	0.3
Licensed Practical Nurses	2.0
Home Health Aides	2.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.1
Homemakers	0.0
Other Staff	2.8
TOTAL FTEs	8.6

Indianhead Medical Center, Inc.113 4th Avenue
Shell Lake WI 54871

Washburn County

(715) 468-7833

COUNTIES SERVEDBarron
Burnett
Sawyer
Washburn

License Number: 324

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 9

Number of unduplicated patients in 2000 = 85

TOTAL NUMBER OF ADMISSIONS 74**PERCENT ADMISSIONS FROM:**

Private Residences	29.7%
General Hospitals	60.8
Nursing Homes	6.8
Other	2.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 73

PERCENT DISCHARGES TO:

Private Residences	63.0%
General Hospitals	11.0
Nursing Homes	11.0
Deaths	4.1
Other	11.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	82	1,707	20.8
Home Health Aide	31	787	25.4
Physical Therapy	20	133	6.7
Spch/Occ/Resp Therapy	6	52	8.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	9	419	46.6
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,098	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.2%	Medicare 73.0%
4 to 24 0.0	Medicaid 11.2
25 to 54 9.4	Other Federal 0.0
55 to 64 8.2	State Funds 0.0
65 to 74 17.6	Private Insurance 13.5
75 to 84 31.8	Self Pay 2.2
85 & over 31.8	Other 0.0
	TOTAL PATIENTS 89

Males 38.8% Females 61.2 %

PRIMARY DIAGNOSIS

Infectious Disorders	2.4%	Digestive Disorders	5.9%
Cancer	4.7	Genitourinary Sys.	3.5
Diabetes	8.2	Preg. & Childbirth	0.0
Diseases of Blood	1.2	Arthropathies	11.8
Dementia/Alzheimers	3.5	Osteopathies	3.5
Psychoses/Neuroses	0.0	Perinatal Period	0.0
Central Nervous Sys.	0.0	Ill-Defined Cond.	2.4
Paralysis/CP	0.0	Fractures	7.1
Cardiovascular	14.1	Wounds, Burns	2.4
Stroke	3.5	Compl. of Surgery	1.2
Respiratory	9.4	Other Conditions	15.3

REVENUE

Billings	\$	257,284
Disallowances		36,584
Collections		220,700
Other		0
Total		220,700

EXPENSES

Total	\$	330,066
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.9
Registered Nurses	2.1
Licensed Practical Nurses	0.2
Home Health Aides	0.6
Physical Therapists	0.1
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.1
Homemakers	0.0
Other Staff	0.8
TOTAL FTEs	5.0

Spooner Health System Home Care

819 Ash Street

Spooner WI 54801

Washburn County

(715) 635-2111

COUNTIES SERVED

Burnett

Douglas

Washburn

License Number: 208

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 113

TOTAL NUMBER OF ADMISSIONS 135**PERCENT ADMISSIONS FROM:**

Private Residences 23.0%

General Hospitals 65.2

Nursing Homes 11.9

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	110	1,313	11.9
Home Health Aide	58	971	16.7
Physical Therapy	52	436	8.4
Spch/Occ/Resp Therapy	30	140	4.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	18	457	25.4
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	3	96	32.0
TOTAL	XXXXXXX	3,413	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 132

PERCENT DISCHARGES TO:

Private Residences 59.1%

General Hospitals 29.5

Nursing Homes 6.8

Deaths 2.3

Other 2.3

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.9%	Medicare 75.0%
4 to 24 0.9	Medicaid 13.6
25 to 54 10.6	Other Federal 0.0
55 to 64 7.1	State Funds 0.0
65 to 74 10.6	Private Insurance 8.0
75 to 84 44.2	Self Pay 2.8
85 & over 25.7	Other 0.6
	TOTAL PATIENTS 176

Males 35.4% Females 64.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.8%	Digestive Disorders 5.3%
Cancer 3.5	Genitourinary Sys. 1.8
Diabetes 1.8	Preg. & Childbirth 0.0
Diseases of Blood 1.8	Arthropathies 18.6
Dementia/Alzheimers 1.8	Osteopathies 2.7
Psychoses/Neuroses 0.9	Perinatal Period 0.0
Central Nervous Sys. 1.8	Ill-Defined Cond. 8.0
Paralysis/CP 0.0	Fractures 8.0
Cardiovascular 18.6	Wounds, Burns 3.5
Stroke 8.0	Compl. of Surgery 0.0
Respiratory 9.7	Other Conditions 2.7

REVENUE

Billings \$	307,058
Disallowances	67,701
Collections	239,357
Other	861
Total	240,218

EXPENSES

Total \$	275,277
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 1.7

Licensed Practical Nurses 0.0

Home Health Aides 0.5

Physical Therapists 0.2

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 0.5

Homemakers 0.0

Other Staff 1.6

TOTAL FTEs 6.5

Washburn County Health Department222 Oak Street
Spooner WI 54801

Washburn County

COUNTIES SERVED

Washburn

(715) 635-4400

License Number: 111

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 92

TOTAL NUMBER OF ADMISSIONS 104**PERCENT ADMISSIONS FROM:**

Private Residences 96.2%

General Hospitals 0.0

Nursing Homes 1.9

Other 1.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 100

PERCENT DISCHARGES TO:

Private Residences 63.0%

General Hospitals 23.0

Nursing Homes 9.0

Deaths 2.0

Other 3.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	92	1,239	13.5
Home Health Aide	58	791	13.6
Physical Therapy	40	522	13.1
Spch/Occ/Resp Therapy	12	51	4.3
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	26	524	20.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,127	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.3%	Medicare 57.6%
4 to 24 0.0	Medicaid 25.4
25 to 54 13.0	Other Federal 5.1
55 to 64 13.0	State Funds 0.0
65 to 74 14.1	Private Insurance 6.8
75 to 84 33.7	Self Pay 5.1
85 & over 22.8	Other 0.0
	TOTAL PATIENTS 118

Males 68.5% Females 31.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.1%	Digestive Disorders 0.0%
Cancer 5.4	Genitourinary Sys. 2.2
Diabetes 4.3	Preg. & Childbirth 0.0
Diseases of Blood 2.2	Arthropathies 12.0
Dementia/Alzheimers 2.2	Osteopathies 5.4
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 3.3	Ill-Defined Cond. 3.3
Paralysis/CP 2.2	Fractures 7.6
Cardiovascular 13.0	Wounds, Burns 5.4
Stroke 2.2	Compl. of Surgery 2.2
Respiratory 6.5	Other Conditions 18.5

REVENUE

Billings \$	245,895
Disallowances	43,953
Collections	201,942
Other	132,286
Total	334,228

EXPENSES

Total \$	376,309
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STAFFING**FTEs**

Administrators 0.2

Reg. Nurse Supervisors 0.0

Registered Nurses 2.0

Licensed Practical Nurses 0.0

Home Health Aides 1.7

Physical Therapists 0.0

Occupational Therapists 0.0

Speech Pathologists 0.0

Respiratory Therapists 0.0

Medical Social Workers 0.0

Other Therapeutic Staff 0.0

Personal Care Workers 0.1

Homemakers 0.0

Other Staff 1.5

TOTAL FTEs 5.5

Heartland Home Health Care & Hospice

13255 West Bluemound Road, Suite 202

Brookfield WI 53005

Waukesha County

(262) 641-6620

License Number: 280

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 122

Number of unduplicated patients in 2000 = 1,447

COUNTIES SERVED

Dodge

Fond du Lac

Jefferson

Kenosha

Milwaukee

Ozaukee

Racine

Sheboygan

Walworth

Washington

Waukesha

TOTAL NUMBER OF ADMISSIONS 1,327**PERCENT ADMISSIONS FROM:**

Private Residences 58.6%

General Hospitals 18.9

Nursing Homes 15.4

Other 7.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,355

PERCENT DISCHARGES TO:

Private Residences 78.1%

General Hospitals 10.9

Nursing Homes 6.5

Deaths 3.1

Other 1.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	972	18,612	19.1
Home Health Aide	334	11,041	33.1
Physical Therapy	469	4,000	8.5
Spch/Occ/Resp Therapy	219	1,640	7.5
Medical Social Service	188	767	4.1
Private Duty Nursing	185	6,734	36.4
Personal Care/PC RN Supv.	498	10,597	21.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	26	556	21.4
TOTAL	XXXXXXX	53,947	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 61.5%
4 to 24 5.9	Medicaid 11.4
25 to 54 10.9	Other Federal .
55 to 64 8.6	State Funds .
65 to 74 16.9	Private Insurance .
75 to 84 33.9	Self Pay 5.8
85 & over 23.8	Other 8.5
	TOTAL PATIENTS 2,439

Males 36.4% Females 63.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.4%	Digestive Disorders 3.4%
Cancer 5.8	Genitourinary Sys. 2.4
Diabetes 4.8	Preg. & Childbirth 0.7
Diseases of Blood 2.5	Arthropathies 6.2
Dementia/Alzheimers 3.2	Osteopathies 3.3
Psychoses/Neuroses 1.7	Perinatal Period 0.8
Central Nervous Sys. 4.4	Ill-Defined Cond. 15.1
Paralysis/CP 3.1	Fractures 5.6
Cardiovascular 10.5	Wounds, Burns 4.4
Stroke 5.9	Compl. of Surgery 1.8
Respiratory 5.5	Other Conditions 7.5

REVENUE

Billings \$	1,802,405
Disallowances	13,569
Collections	1,788,836
Other	0
Total	1,788,836

EXPENSES

Total \$	1,799,728
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STAFFING**FTEs**

Administrators	3.0
Reg. Nurse Supervisors	6.0
Registered Nurses	13.6
Licensed Practical Nurses	10.1
Home Health Aides	24.1
Physical Therapists	1.9
Occupational Therapists	0.7
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.7
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	1.7
Other Staff	7.0
TOTAL FTEs	68.7

Sunrise Home Health Care, Inc.

405 North Calhoun Road, Suite 104

Brookfield WI 53005

Waukesha County

COUNTIES SERVED

Milwaukee

Racine

Waukesha

(262) 780-2490

License Number: 274

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 2

Number of unduplicated patients in 2000 = 66

TOTAL NUMBER OF ADMISSIONS 28**PERCENT ADMISSIONS FROM:**

Private Residences 39.3%

General Hospitals 42.9

Nursing Homes 17.9

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 65

PERCENT DISCHARGES TO:

Private Residences 92.3%

General Hospitals 4.6

Nursing Homes 3.1

Deaths 0.0

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	36	1,826	50.7
Home Health Aide	6	176	29.3
Physical Therapy	4	32	8.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	31	625	20.2
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	7	228	32.6
TOTAL	XXXXXXX	2,887	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 21.4%
4 to 24 0.0	Medicaid 54.3
25 to 54 6.1	Other Federal 1.4
55 to 64 9.1	State Funds 12.9
65 to 74 39.4	Private Insurance 7.1
75 to 84 39.4	Self Pay 2.9
85 & over 6.1	Other 0.0
	TOTAL PATIENTS 70

Males 48.5% Females 51.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 1.5%
Cancer 1.5	Genitourinary Sys. 4.5
Diabetes 1.5	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 1.5
Cardiovascular 0.0	Wounds, Burns 39.4
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 3.0	Other Conditions 47.0

REVENUE

Billings \$	217,363
Disallowances	34,672
Collections	182,691
Other	331
Total	183,022

EXPENSES

Total \$	163,585
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	0.3
Registered Nurses	0.8
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.2
Homemakers	0.0
Other Staff	0.4
TOTAL FTEs	2.8

Universal Pediatric Services, Inc.

17100 West Bluemound Road, Suite 200

Brookfield WI 53005

Waukesha County

(800) 383-0303

License Number: 1009

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 16

Number of unduplicated patients in 2000 = 47

COUNTIES SERVED

Dane

Jefferson

Kenosha

Milwaukee

Ozaukee

Racine

Walworth

Washington

Waukesha

TOTAL NUMBER OF ADMISSIONS 18**PERCENT ADMISSIONS FROM:**

Private Residences 61.1%

General Hospitals 33.3

Nursing Homes 0.0

Other 5.6

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 21

PERCENT DISCHARGES TO:

Private Residences 81.0%

General Hospitals 0.0

Nursing Homes 0.0

Deaths 9.5

Other 9.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	46	574	12.5
Home Health Aide	2	24	12.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	598	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 38.3%	Medicare 0.0%
4 to 24 61.7	Medicaid 83.3
25 to 54 0.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 0.0	Private Insurance 16.7
75 to 84 0.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 54

Males 59.6% Females 40.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 2.1%
Cancer 2.1	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 17.0
Central Nervous Sys. 2.1	Ill-Defined Cond. 4.3
Paralysis/CP 12.8	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 10.6	Other Conditions 48.9

REVENUE

Billings	\$ 1,202,711
Disallowances	571,640
Collections	631,071
Other	0
Total	631,071

EXPENSES

Total	\$ 1,084,185
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	10.3
Licensed Practical Nurses	6.8
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.0
TOTAL FTEs	20.1

Prohealth Home Care

1020 James Drive
Hartland WI 53029

Waukesha County

(262) 928-7444

License Number: 170
Ownership of Agency: Nonprofit Corporation
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 149
Number of unduplicated patients in 2000 = 2,201

COUNTIES SERVED

Dodge
Jefferson
Kenosha
Milwaukee
Racine
Rock
Walworth
Washington
Waukesha

TOTAL NUMBER OF ADMISSIONS 2,434

PERCENT ADMISSIONS FROM:

Private Residences 14.9%
General Hospitals 63.5
Nursing Homes 3.8
Other 17.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 2,355

PERCENT DISCHARGES TO:

Private Residences 78.3%
General Hospitals 11.0
Nursing Homes 3.3
Deaths 1.2
Other 6.2

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	2,179	27,348	12.6
Home Health Aide	405	8,848	21.8
Physical Therapy	771	5,037	6.5
Spch/Occ/Resp Therapy	297	2,200	7.4
Medical Social Service	68	94	1.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	470	12,157	25.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	140	3,560	25.4
TOTAL	XXXXXXX	59,244	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.1%	Medicare 44.1%
4 to 24 6.9	Medicaid 5.5
25 to 54 26.2	Other Federal 0.0
55 to 64 6.4	State Funds 3.6
65 to 74 15.1	Private Insurance 29.3
75 to 84 24.8	Self Pay 17.2
85 & over 15.5	Other 0.4
	TOTAL PATIENTS 3,427

Males 30.7% Females 69.3 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.3%	Digestive Disorders 4.8%
Cancer 7.4	Genitourinary Sys. 4.2
Diabetes 3.0	Preg. & Childbirth 19.8
Diseases of Blood 1.2	Arthropathies 6.2
Dementia/Alzheimers 0.3	Osteopathies 1.4
Psychoses/Neuroses 1.3	Perinatal Period 4.6
Central Nervous Sys. 2.9	Ill-Defined Cond. 4.1
Paralysis/CP 0.4	Fractures 5.5
Cardiovascular 15.0	Wounds, Burns 6.6
Stroke 2.8	Compl. of Surgery 0.5
Respiratory 5.8	Other Conditions 0.9

REVENUE

Billings \$	3,845,216
Disallowances	600,839
Collections	3,244,377
Other	36,000
Total	3,280,377

EXPENSES

Total \$	3,465,764
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	3.0
Registered Nurses	27.1
Licensed Practical Nurses	1.6
Home Health Aides	17.8
Physical Therapists	5.0
Occupational Therapists	1.3
Speech Pathologists	0.4
Respiratory Therapists	0.0
Medical Social Workers	1.2
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	3.1
Other Staff	10.6
TOTAL FTEs	72.1

Hannah Home Health Care, Inc.

920 Greenwald Court, Suite 300

Mukwonago WI 53149

Waukesha County

(262) 363-2500

COUNTIES SERVED

Milwaukee

Racine

Walworth

Waukesha

License Number: 240

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 30

Number of unduplicated patients in 2000 = 117

TOTAL NUMBER OF ADMISSIONS 69**PERCENT ADMISSIONS FROM:**

Private Residences 26.1%

General Hospitals 56.5

Nursing Homes 13.0

Other 4.3

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 76

PERCENT DISCHARGES TO:

Private Residences 73.7%

General Hospitals 9.2

Nursing Homes 14.5

Deaths 2.6

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	104	3,084	29.7
Home Health Aide	64	10,411	162.7
Physical Therapy	26	225	8.7
Spch/Occ/Resp Therapy	6	11	1.8
Medical Social Service	0	0	0.0
Private Duty Nursing	1	62	62.0
Personal Care/PC RN Supv.	26	663	25.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	14,456	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 1.7%	Medicare 43.0%
4 to 24 12.0	Medicaid 27.3
25 to 54 25.6	Other Federal 2.3
55 to 64 12.0	State Funds 0.8
65 to 74 10.3	Private Insurance 19.5
75 to 84 27.4	Self Pay 7.0
85 & over 11.1	Other 0.0
	TOTAL PATIENTS 128

Males 38.5% Females 61.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.7%	Digestive Disorders 2.6%
Cancer 2.6	Genitourinary Sys. 6.0
Diabetes 2.6	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 6.8
Dementia/Alzheimers 2.6	Osteopathies 0.9
Psychoses/Neuroses 1.7	Perinatal Period 0.0
Central Nervous Sys. 11.1	Ill-Defined Cond. 6.8
Paralysis/CP 7.7	Fractures 6.0
Cardiovascular 12.8	Wounds, Burns 2.6
Stroke 6.0	Compl. of Surgery 2.6
Respiratory 0.9	Other Conditions 15.4

REVENUE

Billings \$	895,487
Disallowances	180,447
Collections	715,040
Other	0
Total	715,040

EXPENSES

Total \$	672,386
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.6
Licensed Practical Nurses	0.0
Home Health Aides	7.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	3.4
TOTAL FTEs	15.3

Coram Alternate Site Services, Inc.

17012 West Victor Road

New Berlin WI 53151

Waukesha County

(262) 785-9318

License Number: 247

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 5

Number of unduplicated patients in 2000 = 216

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	216	1,418	6.6
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,418	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 6.5%	Medicare 0.0%
4 to 24 19.0	Medicaid 0.0
25 to 54 49.1	Other Federal 0.9
55 to 64 14.4	State Funds 0.0
65 to 74 9.7	Private Insurance 85.2
75 to 84 0.9	Self Pay 13.9
85 & over 0.5	Other 0.0
	TOTAL PATIENTS 216

Males 47.2% Females 52.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 7.4%	Digestive Disorders 4.2%
Cancer 29.2	Genitourinary Sys. 0.5
Diabetes 0.0	Preg. & Childbirth 2.3
Diseases of Blood 4.2	Arthropathies 5.6
Dementia/Alzheimers 0.0	Osteopathies 4.6
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 8.3	Ill-Defined Cond. 0.9
Paralysis/CP 0.0	Fractures 0.5
Cardiovascular 0.9	Wounds, Burns 0.9
Stroke 0.0	Compl. of Surgery 5.6
Respiratory 4.2	Other Conditions 20.8

COUNTIES SERVED

Dane
Dodge
Door
Fond du Lac
Jefferson
Kenosha
LaFayette
Marinette
Milwaukee
Outagamie
Ozaukee
Racine
Sheboygan
Walworth
Washington
Waukesha
Winnebago

TOTAL NUMBER OF ADMISSIONS 188**PERCENT ADMISSIONS FROM:**

Private Residences	34.0%
General Hospitals	63.3
Nursing Homes	0.5
Other	2.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 199

PERCENT DISCHARGES TO:

Private Residences	84.9%
General Hospitals	1.0
Nursing Homes	0.0
Deaths	5.5
Other	8.5

STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	3.6
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTEs	5.6

REVENUE

Billings \$	275,049
Disallowances	161,919
Collections	113,130
Other	0
Total	113,130

EXPENSES

Total \$	377,856
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Lutheran Social Services Home Care

N555A W226 Eastmound Drive

Waukesha WI 53186

Waukesha County

(262) 896-3444

COUNTIES SERVED

Milwaukee

Rock

Walworth

Waukesha

License Number: 220

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 129

Number of unduplicated patients in 2000 = 203

TOTAL NUMBER OF ADMISSIONS 60**PERCENT ADMISSIONS FROM:**

Private Residences 40.0%

General Hospitals 20.0

Nursing Homes 13.3

Other 26.7

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 31

PERCENT DISCHARGES TO:

Private Residences 35.5%

General Hospitals 48.4

Nursing Homes 9.7

Deaths 0.0

Other 6.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	203	5,233	25.8
Home Health Aide	42	9,497	226.1
Physical Therapy	1	12	12.0
Spch/Occ/Resp Therapy	1	8	8.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	282	68,894	244.3
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	83,644	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 5.6%
4 to 24 11.8	Medicaid 90.6
25 to 54 58.1	Other Federal 0.0
55 to 64 9.4	State Funds 0.5
65 to 74 6.4	Private Insurance 1.9
75 to 84 8.9	Self Pay 1.4
85 & over 5.4	Other 0.0
	TOTAL PATIENTS 213

Males 44.8% Females 55.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.5%	Digestive Disorders 0.0%
Cancer 1.5	Genitourinary Sys. 0.0
Diabetes 6.9	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 3.0
Dementia/Alzheimers 1.5	Osteopathies 1.0
Psychoses/Neuroses 11.8	Perinatal Period 0.0
Central Nervous Sys. 5.4	Ill-Defined Cond. 0.5
Paralysis/CP 15.3	Fractures 1.0
Cardiovascular 3.4	Wounds, Burns 2.5
Stroke 2.0	Compl. of Surgery 0.0
Respiratory 1.5	Other Conditions 42.4

REVENUE

Billings \$	2,334,581
Disallowances	65,029
Collections	2,269,552
Other	0
Total	2,269,552

EXPENSES

Total \$	2,205,469
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	8.6
Licensed Practical Nurses	0.1
Home Health Aides	9.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	51.8
Homemakers	0.0
Other Staff	6.0
TOTAL FTEs	78.0

St. Joseph Home Care

101 East Beckert Road, #011
New London WI 54961

Waupaca County

COUNTIES SERVED

Waupaca

(920) 982-5354

License Number: 300

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? No

Title 19 (Medicaid) certified? No

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 0

Number of unduplicated patients in 2000 = 1

TOTAL NUMBER OF ADMISSIONS 0

PERCENT ADMISSIONS FROM:

Private Residences	0.0%
General Hospitals	0.0
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1	14	14.0
Home Health Aide	1	338	338.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	352	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1

PERCENT DISCHARGES TO:

Private Residences	100.0%
General Hospitals	0.0
Nursing Homes	0.0
Deaths	0.0
Other	0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 0.0	Medicaid 0.0
25 to 54 0.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 0.0	Private Insurance 0.0
75 to 84 0.0	Self Pay 100.0
85 & over 100.0	Other 0.0
	TOTAL PATIENTS 1

Males 0.0% Females 100.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 100
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 0.0

REVENUE

Billings \$	4,739
Disallowances	0
Collections	4,739
Other	59,218
Total	63,957

EXPENSES

Total \$	50,985
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.0
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.4
TOTAL FTEs	0.5

REM Health of Wisconsin, Inc.

112 South Main Street

Waupaca WI 54981

Waupaca County

(608) 356-7570

COUNTIES SERVED

Brown

Outagamie

Sheboygan

Waupaca

Waushara

License Number: 24

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 29

Number of unduplicated patients in 2000 = 61

TOTAL NUMBER OF ADMISSIONS 50**PERCENT ADMISSIONS FROM:**

Private Residences 56.0%

General Hospitals 36.0

Nursing Homes 4.0

Other 4.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 42

PERCENT DISCHARGES TO:

Private Residences 61.9%

General Hospitals 28.6

Nursing Homes 2.4

Deaths 4.8

Other 2.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	60	509	8.5
Home Health Aide	15	3,055	203.7
Physical Therapy	5	72	14.4
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	5	1,227	245.4
Personal Care/PC RN Supv.	35	3,174	90.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	8,037	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 35.9%
4 to 24 8.2	Medicaid 28.1
25 to 54 34.4	Other Federal 0.0
55 to 64 14.8	State Funds 0.0
65 to 74 16.4	Private Insurance 34.4
75 to 84 16.4	Self Pay 1.6
85 & over 9.8	Other 0.0
	TOTAL PATIENTS 64

Males 54.1% Females 45.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 3.3%	Digestive Disorders 8.2%
Cancer 4.9	Genitourinary Sys. 0.0
Diabetes 3.3	Preg. & Childbirth 1.6
Diseases of Blood 1.6	Arthropathies 0.0
Dementia/Alzheimers 4.9	Osteopathies 3.3
Psychoses/Neuroses 3.3	Perinatal Period 0.0
Central Nervous Sys. 23.0	Ill-Defined Cond. 3.3
Paralysis/CP 1.6	Fractures 0.0
Cardiovascular 13.1	Wounds, Burns 3.3
Stroke 3.3	Compl. of Surgery 0.0
Respiratory 3.3	Other Conditions 14.8

REVENUE

Billings \$	946,564
Disallowances	344,437
Collections	602,127
Other	223
Total	602,350

EXPENSES

Total \$	636,939
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	1.5
Registered Nurses	1.4
Licensed Practical Nurses	2.5
Home Health Aides	2.5
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.9
Homemakers	0.0
Other Staff	1.4
TOTAL FTEs	10.4

Waupaca County Department/Human Services

811 Harding Street

Waupaca WI 54981

Waupaca County

COUNTIES SERVED

Waupaca

(715) 258-6323

License Number: 114

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 9

Number of unduplicated patients in 2000 = 90

TOTAL NUMBER OF ADMISSIONS 73**PERCENT ADMISSIONS FROM:**

Private Residences	30.1%
General Hospitals	57.5
Nursing Homes	12.3
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 68

PERCENT DISCHARGES TO:

Private Residences	72.1%
General Hospitals	14.7
Nursing Homes	2.9
Deaths	2.9
Other	7.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	82	858	10.5
Home Health Aide	39	1,557	39.9
Physical Therapy	17	83	4.9
Spch/Occ/Resp Therapy	6	16	2.7
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,514	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 37.5%
4 to 24 2.2	Medicaid 4.2
25 to 54 14.4	Other Federal 0.0
55 to 64 8.9	State Funds 3.1
65 to 74 18.9	Private Insurance 14.6
75 to 84 30.0	Self Pay 40.6
85 & over 25.6	Other 0.0
	TOTAL PATIENTS 96

Males 41.1% Females 58.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 4.4%
Cancer 11.1	Genitourinary Sys. 1.1
Diabetes 7.8	Preg. & Childbirth 0.0
Diseases of Blood 1.1	Arthropathies 14.4
Dementia/Alzheimers 1.1	Osteopathies 2.2
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 4.4	Ill-Defined Cond. 3.3
Paralysis/CP 0.0	Fractures 3.3
Cardiovascular 15.6	Wounds, Burns 3.3
Stroke 5.6	Compl. of Surgery 1.1
Respiratory 3.3	Other Conditions 15.6

REVENUE

Billings \$	211,028
Disallowances	39,487
Collections	171,541
Other	100
Total	171,641

EXPENSES

Total \$	223,770
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	0.0
Registered Nurses	2.8
Licensed Practical Nurses	0.0
Home Health Aides	1.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.4
TOTAL FTEs	4.7

Preferred Home Health Care, Inc.

1476 Kenwood Drive

Menasha WI 54952

Winnebago County

(920) 725-1116

COUNTIES SERVED

Calumet

Outagamie

Winnebago

License Number: 157

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 49

Number of unduplicated patients in 2000 = 221

TOTAL NUMBER OF ADMISSIONS 78**PERCENT ADMISSIONS FROM:**

Private Residences 78.2%

General Hospitals 9.0

Nursing Homes 9.0

Other 3.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	112	1,378	12.3
Home Health Aide	92	17,040	185.2
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	7	798	114.0
Personal Care/PC RN Supv.	149	11,605	77.9
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	50	2,182	43.6
TOTAL	XXXXXXX	33,003	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 67

PERCENT DISCHARGES TO:

Private Residences 41.8%

General Hospitals 11.9

Nursing Homes 25.4

Deaths 4.5

Other 16.4

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.5%	Medicare 7.9%
4 to 24 4.5	Medicaid 47.4
25 to 54 24.4	Other Federal 0.0
55 to 64 12.2	State Funds 20.6
65 to 74 11.8	Private Insurance 5.2
75 to 84 24.9	Self Pay 18.9
85 & over 21.7	Other 0.0
	TOTAL PATIENTS 291

Males 32.1% Females 67.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.9%	Digestive Disorders 1.8%
Cancer 3.6	Genitourinary Sys. 0.9
Diabetes 5.9	Preg. & Childbirth 0.0
Diseases of Blood 0.9	Arthropathies 14.0
Dementia/Alzheimers 2.7	Osteopathies 5.4
Psychoses/Neuroses 3.2	Perinatal Period 0.5
Central Nervous Sys. 13.6	Ill-Defined Cond. 0.9
Paralysis/CP 11.8	Fractures 4.1
Cardiovascular 5.9	Wounds, Burns 1.4
Stroke 12.2	Compl. of Surgery 0.0
Respiratory 5.9	Other Conditions 4.5

REVENUE

Billings \$	1,678,463
Disallowances	352,627
Collections	1,325,836
Other	3,879
Total	1,329,715

EXPENSES

Total \$	1,326,884
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	3.5
Registered Nurses	3.5
Licensed Practical Nurses	1.6
Home Health Aides	19.9
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	2.6
Other Staff	4.0
TOTAL FTEs	36.1

Thedacare At Home

201 East Bell Street
Neenah WI 54957

Winnebago County

(920) 969-0919

License Number: 88

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 61

Number of unduplicated patients in 2000 = 1,507

COUNTIES SERVED

Brown
Calumet
Manitowoc
Outagamie
Waupaca
Winnebago

TOTAL NUMBER OF ADMISSIONS 1,661

PERCENT ADMISSIONS FROM:

Private Residences	2.0%
General Hospitals	64.9
Nursing Homes	3.1
Other	30.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,557

PERCENT DISCHARGES TO:

Private Residences	81.6%
General Hospitals	8.7
Nursing Homes	3.1
Deaths	2.8
Other	3.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,501	12,774	8.5
Home Health Aide	246	6,462	26.3
Physical Therapy	333	2,170	6.5
Spch/Occ/Resp Therapy	104	395	3.8
Medical Social Service	35	42	1.2
Private Duty Nursing	2	1,002	501.0
Personal Care/PC RN Supv.	36	2,321	64.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	25,166	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 4.3%	Medicare 59.7%
4 to 24 7.0	Medicaid 7.4
25 to 54 18.7	Other Federal 0.0
55 to 64 10.1	State Funds 0.2
65 to 74 14.7	Private Insurance 27.4
75 to 84 25.7	Self Pay 5.3
85 & over 19.4	Other 0.0
	TOTAL PATIENTS 1,769

Males 43.9% Females 56.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 2.4%	Digestive Disorders 4.3%
Cancer 15.5	Genitourinary Sys. 3.8
Diabetes 2.2	Preg. & Childbirth 2.1
Diseases of Blood 1.2	Arthropathies 7.1
Dementia/Alzheimers 0.4	Osteopathies 1.5
Psychoses/Neuroses 0.8	Perinatal Period 3.3
Central Nervous Sys. 1.9	Ill-Defined Cond. 4.6
Paralysis/CP 0.2	Fractures 6.3
Cardiovascular 12.9	Wounds, Burns 14.3
Stroke 2.7	Compl. of Surgery 0.7
Respiratory 9.5	Other Conditions 2.5

REVENUE

Billings	\$ 2,378,876
Disallowances	174,392
Collections	2,204,484
Other	64,589
Total	2,269,073

EXPENSES

Total	\$ 2,793,313
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	22.0
Licensed Practical Nurses	2.6
Home Health Aides	7.6
Physical Therapists	3.1
Occupational Therapists	0.2
Speech Pathologists	0.2
Respiratory Therapists	0.0
Medical Social Workers	1.5
Other Therapeutic Staff	0.1
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	14.0
TOTAL FTEs	53.3

Affiliated Home Care, Inc.415 Broad Street
Oshkosh WI 54901

Winnebago County

(920) 236-6567

License Number: 214

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 271

Number of unduplicated patients in 2000 = 371

COUNTIES SERVEDBrown
Calumet
Fond du Lac
Oconto
Oneida
Outagamie
Shawano
Waupaca
Waushara
Winnebago**TOTAL NUMBER OF ADMISSIONS** 99**PERCENT ADMISSIONS FROM:**Private Residences 45.5%
General Hospitals 12.1
Nursing Homes 15.2
Other 27.3**TOTAL NUMBER OF DISCHARGES**

(Including Deaths) 107

PERCENT DISCHARGES TO:Private Residences 44.9%
General Hospitals 7.5
Nursing Homes 21.5
Deaths 10.3
Other 15.9

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	222	3,399	15.3
Home Health Aide	49	9,915	202.3
Physical Therapy	28	312	11.1
Spch/Occ/Resp Therapy	10	149	14.9
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	516	181,876	352.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	195,651	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 11.6%
4 to 24 5.9	Medicaid 83.3
25 to 54 46.9	Other Federal 0.0
55 to 64 11.1	State Funds 0.0
65 to 74 10.0	Private Insurance 2.4
75 to 84 12.9	Self Pay 0.0
85 & over 13.2	Other 2.7
	TOTAL PATIENTS 371

Males 50.1% Females 49.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.3%	Digestive Disorders 0.8%
Cancer 1.6	Genitourinary Sys. 0.5
Diabetes 8.1	Preg. & Childbirth 0.0
Diseases of Blood 1.3	Arthropathies 5.4
Dementia/Alzheimers 1.3	Osteopathies 0.5
Psychoses/Neuroses 4.9	Perinatal Period 0.0
Central Nervous Sys. 4.3	Ill-Defined Cond. 6.7
Paralysis/CP 8.9	Fractures 4.6
Cardiovascular 6.2	Wounds, Burns 2.7
Stroke 3.5	Compl. of Surgery 0.3
Respiratory 2.7	Other Conditions 34.2

REVENUE

Billings	\$ 4,294,703
Disallowances	819,297
Collections	3,475,406
Other	29,329
Total	3,504,735

EXPENSES

Total	\$ 3,337,128
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	4.8
Licensed Practical Nurses	2.8
Home Health Aides	0.3
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	5.8
TOTAL FTEs	16.6

Affinity Visiting Nurses

515 South Washburn, Suite 206

Oshkosh WI 54904

Winnebago County

(920) 236-8500

License Number: 144

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 51

Number of unduplicated patients in 2000 = 1,167

COUNTIES SERVED

Calumet

Fond du Lac

Green Lake

Outagamie

Waupaca

Waushara

Winnebago

TOTAL NUMBER OF ADMISSIONS 1,199**PERCENT ADMISSIONS FROM:**

Private Residences 0.6%

General Hospitals 68.0

Nursing Homes 6.3

Other 25.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,240

PERCENT DISCHARGES TO:

Private Residences 80.3%

General Hospitals 10.9

Nursing Homes 2.9

Deaths 1.9

Other 4.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,163	14,225	12.2
Home Health Aide	347	8,563	24.7
Physical Therapy	387	3,306	8.5
Spch/Occ/Resp Therapy	153	880	5.8
Medical Social Service	124	298	2.4
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	27,272	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 79.6%
4 to 24 1.5	Medicaid 2.5
25 to 54 11.3	Other Federal 0.4
55 to 64 6.3	State Funds 0.0
65 to 74 20.5	Private Insurance 15.9
75 to 84 36.8	Self Pay 0.7
85 & over 22.8	Other 0.8
	TOTAL PATIENTS 1,230

Males 43.4% Females 56.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.4%	Digestive Disorders 4.9%
Cancer 9.9	Genitourinary Sys. 4.1
Diabetes 1.9	Preg. & Childbirth 0.3
Diseases of Blood 1.4	Arthropathies 10.4
Dementia/Alzheimers 0.4	Osteopathies 1.2
Psychoses/Neuroses 0.5	Perinatal Period 0.3
Central Nervous Sys. 1.2	Ill-Defined Cond. 8.3
Paralysis/CP 0.3	Fractures 7.0
Cardiovascular 23.8	Wounds, Burns 2.1
Stroke 3.5	Compl. of Surgery 3.9
Respiratory 6.7	Other Conditions 7.5

REVENUE

Billings	\$ 3,662,030
Disallowances	983,913
Collections	2,678,117
Other	670
Total	2,678,787

EXPENSES

Total	\$ 3,642,011
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	2.0
Registered Nurses	14.0
Licensed Practical Nurses	0.0
Home Health Aides	10.1
Physical Therapists	1.8
Occupational Therapists	0.8
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	1.5
Other Therapeutic Staff	3.2
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	5.2
TOTAL FTEs	39.5

Homemakers Inc. of Oshkosh

2020 West 9th Avenue, Box 2128

Oshkosh WI 54904

Winnebago County

(920) 233-2081

License Number: 17

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 118

Number of unduplicated patients in 2000 = 413

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	204	6,343	31.1
Home Health Aide	95	23,777	250.3
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	3	348	116.0
Medical Social Service	0	0	0.0
Private Duty Nursing	76	5,285	69.5
Personal Care/PC RN Supv.	286	23,947	83.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	1	11	11.0
TOTAL	XXXXXXX	59,711	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 3.4%	Medicare 6.4%
4 to 24 18.4	Medicaid 69.0
25 to 54 26.4	Other Federal 0.0
55 to 64 9.0	State Funds 15.6
65 to 74 15.7	Private Insurance 4.0
75 to 84 17.7	Self Pay 5.1
85 & over 9.4	Other 0.0
	TOTAL PATIENTS 551

Males 37.5% Females 62.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.9%	Digestive Disorders 0.2%
Cancer 0.7	Genitourinary Sys. 2.2
Diabetes 5.1	Preg. & Childbirth 0.0
Diseases of Blood 0.7	Arthropathies 7.5
Dementia/Alzheimers 7.7	Osteopathies 0.2
Psychoses/Neuroses 2.9	Perinatal Period 1.0
Central Nervous Sys. 8.5	Ill-Defined Cond. 1.7
Paralysis/CP 15.5	Fractures 2.2
Cardiovascular 8.5	Wounds, Burns 2.2
Stroke 3.4	Compl. of Surgery 0.2
Respiratory 4.8	Other Conditions 22.8

COUNTIES SERVED

Brown
Calumet
Dodge
Door
Fond du Lac
Green Lake
Manitowoc
Oconto
Outagamie
Sheboygan
Washington
Waushara
Winnebago

TOTAL NUMBER OF ADMISSIONS 184**PERCENT ADMISSIONS FROM:**

Private Residences	46.7%
General Hospitals	39.7
Nursing Homes	4.3
Other	9.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 173

PERCENT DISCHARGES TO:

Private Residences	42.2%
General Hospitals	34.1
Nursing Homes	6.9
Deaths	5.8
Other	11.0

STAFFING**FTEs**

Administrators	0.4
Reg. Nurse Supervisors	13.0
Registered Nurses	9.9
Licensed Practical Nurses	10.2
Home Health Aides	20.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	12.3
Homemakers	27.4
Other Staff	13.7
TOTAL FTEs	107.7

REVENUE

Billings	\$ 4,275,340
Disallowances	1,128,558
Collections	3,146,782
Other	0
Total	3,146,782

EXPENSES

Total	\$ 2,922,583
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Ministry Home Care, Inc.

611 St. Joseph Avenue
Marshfield WI 54449

Wood County

(715) 387-9685

License Number: 182

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 82

Number of unduplicated patients in 2000 = 1,244

COUNTIES SERVED

Chippewa

Clark

Juneau

Lincoln

Marathon

Portage

Taylor

Waupaca

Waushara

Wood

TOTAL NUMBER OF ADMISSIONS 1,242

PERCENT ADMISSIONS FROM:

Private Residences 3.9%

General Hospitals 59.2

Nursing Homes 9.8

Other 27.1

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1,197

PERCENT DISCHARGES TO:

Private Residences 64.4%

General Hospitals 12.3

Nursing Homes 3.0

Deaths 2.5

Other 17.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	1,114	16,515	14.8
Home Health Aide	350	8,717	24.9
Physical Therapy	399	2,608	6.5
Spch/Occ/Resp Therapy	183	2,017	11.0
Medical Social Service	101	351	3.5
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	18	354	19.7
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	30,562	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.1%	Medicare 77.3%
4 to 24 1.5	Medicaid 6.4
25 to 54 7.6	Other Federal 0.5
55 to 64 7.4	State Funds 1.0
65 to 74 18.1	Private Insurance 9.9
75 to 84 33.0	Self Pay 4.9
85 & over 27.3	Other 0.1
	TOTAL PATIENTS 1,244

Males 40.8% Females 59.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.2%	Digestive Disorders 3.5%
Cancer 7.4	Genitourinary Sys. 2.4
Diabetes 3.6	Preg. & Childbirth 0.0
Diseases of Blood 0.7	Arthropathies 11.1
Dementia/Alzheimers 0.6	Osteopathies 2.1
Psychoses/Neuroses 6.4	Perinatal Period 0.1
Central Nervous Sys. 2.4	Ill-Defined Cond. 8.2
Paralysis/CP 0.6	Fractures 4.6
Cardiovascular 18.6	Wounds, Burns 1.6
Stroke 2.7	Compl. of Surgery 3.1
Respiratory 7.8	Other Conditions 12.1

REVENUE

Billings \$	3,177,880
Disallowances	472,837
Collections	2,705,043
Other	0
Total	2,705,043

EXPENSES

Total \$	2,608,736
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STAFFING**FTEs**

Administrators 1.0

Reg. Nurse Supervisors 1.0

Registered Nurses 16.0

Licensed Practical Nurses 0.8

Home Health Aides 8.8

Physical Therapists 2.8

Occupational Therapists 1.2

Speech Pathologists 0.6

Respiratory Therapists 0.0

Medical Social Workers 0.8

Other Therapeutic Staff 0.0

Personal Care Workers 0.0

Homemakers 0.0

Other Staff 7.0

TOTAL FTEs 40.0

Health Care At Home, Inc.

4011 8th Street - South, Box 396

Wisconsin Rapids WI 54494

Wood County

(715) 421-2323

License Number: 162

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 34

Number of unduplicated patients in 2000 = 352

COUNTIES SERVED

Adams

Juneau

Marathon

Portage

Waupaca

Waushara

Wood

TOTAL NUMBER OF ADMISSIONS 330**PERCENT ADMISSIONS FROM:**

Private Residences 37.6%

General Hospitals 40.3

Nursing Homes 18.2

Other 3.9

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 337

PERCENT DISCHARGES TO:

Private Residences 67.7%

General Hospitals 17.5

Nursing Homes 3.3

Deaths 1.8

Other 9.8

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	343	6,965	20.3
Home Health Aide	130	7,568	58.2
Physical Therapy	112	846	7.6
Spch/Occ/Resp Therapy	32	359	11.2
Medical Social Service	19	34	1.8
Private Duty Nursing	8	496	62.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	16,268	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.0%	Medicare 64.9%
4 to 24 4.3	Medicaid 21.7
25 to 54 8.2	Other Federal 0.0
55 to 64 7.1	State Funds 0.0
65 to 74 19.0	Private Insurance 9.8
75 to 84 34.9	Self Pay 2.4
85 & over 24.4	Other 1.1
	TOTAL PATIENTS 368

Males 35.8% Females 64.2 %

PRIMARY DIAGNOSIS

Infectious Disorders	1.1%	Digestive Disorders	0.6%
Cancer	6.3	Genitourinary Sys.	2.6
Diabetes	7.4	Preg. & Childbirth	0.0
Diseases of Blood	1.1	Arthropathies	9.7
Dementia/Alzheimers	1.1	Osteopathies	1.7
Psychoses/Neuroses	2.8	Perinatal Period	0.3
Central Nervous Sys.	2.8	Ill-Defined Cond.	6.8
Paralysis/CP	2.3	Fractures	8.2
Cardiovascular	13.4	Wounds, Burns	4.3
Stroke	3.4	Compl. of Surgery	1.7
Respiratory	6.0	Other Conditions	16.5

REVENUE

Billings	\$ 1,345,115
Disallowances	179,482
Collections	1,165,633
Other	2,396
Total	1,168,029

EXPENSES

Total	\$ 1,046,329
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.7
Registered Nurses	4.9
Licensed Practical Nurses	2.3
Home Health Aides	6.5
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.1
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	7.9
TOTAL FTEs	24.3

Mercy Home Care-Dubuque

250 Mercury Drive
Dubuque IA 52001

Out of State

COUNTIES SERVED

Grant
LaFayette

(563) 589-8118

License Number: 197

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 2

Number of unduplicated patients in 2000 = 91

TOTAL NUMBER OF ADMISSIONS 109

PERCENT ADMISSIONS FROM:

Private Residences	0.9%
General Hospitals	94.5
Nursing Homes	0.0
Other	4.6

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	72	1,083	15.0
Home Health Aide	14	210	15.0
Physical Therapy	56	508	9.1
Spch/Occ/Resp Therapy	15	87	5.8
Medical Social Service	3	5	1.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,893	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 104

PERCENT DISCHARGES TO:

Private Residences	88.5%
General Hospitals	0.0
Nursing Homes	5.8
Deaths	1.9
Other	3.8

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 81.3%
4 to 24 1.1	Medicaid 3.3
25 to 54 9.9	Other Federal 0.0
55 to 64 7.7	State Funds 0.0
65 to 74 25.3	Private Insurance 15.4
75 to 84 41.8	Self Pay 0.0
85 & over 14.3	Other 0.0
	TOTAL PATIENTS 91

Males 41.8% Females 58.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 1.1%	Digestive Disorders 3.3%
Cancer 7.7	Genitourinary Sys. 1.1
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 8.8	Osteopathies 0.0
Psychoses/Neuroses 1.1	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 49.5
Cardiovascular 22.0	Wounds, Burns 1.1
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 4.4	Other Conditions 0.0

REVENUE

Billings \$	182,462
Disallowances	29,518
Collections	152,944
Other	0
Total	152,944

EXPENSES

Total \$	160,972
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.1
Registered Nurses	0.8
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.3
Occupational Therapists	0.1
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.5
TOTAL FTEs	2.0

Interim Healthcare-Lake Superior

4418 Haines Road, Suite 700

Duluth MN 55811

Out of State

COUNTIES SERVED

Douglas

(218) 722-0053

License Number: 284

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 3

Number of unduplicated patients in 2000 = 24

TOTAL NUMBER OF ADMISSIONS 15**PERCENT ADMISSIONS FROM:**

Private Residences 66.7%

General Hospitals 20.0

Nursing Homes 13.3

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 3

PERCENT DISCHARGES TO:

Private Residences 66.7%

General Hospitals 0.0

Nursing Homes 33.3

Deaths 0.0

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	10	268	26.8
Home Health Aide	7	1,021	145.9
Physical Therapy	3	32	10.7
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	4	111	27.8
TOTAL	XXXXXXX	1,432	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 16.7%
4 to 24 0.0	Medicaid 4.2
25 to 54 16.7	Other Federal 12.5
55 to 64 16.7	State Funds 29.2
65 to 74 33.3	Private Insurance 0.0
75 to 84 33.3	Self Pay 33.3
85 & over 0.0	Other 4.2
	TOTAL PATIENTS 24

Males 12.5% Females 87.5 %

PRIMARY DIAGNOSIS

Infectious Disorders 4.2%	Digestive Disorders 0.0%
Cancer 4.2	Genitourinary Sys. 4.2
Diabetes 8.3	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 0.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 4.2
Cardiovascular 4.2	Wounds, Burns 0.0
Stroke 4.2	Compl. of Surgery 0.0
Respiratory 8.3	Other Conditions 58.3

REVENUE

Billings \$	66,691
Disallowances	9,439
Collections	57,252
Other	0
Total	57,252

EXPENSES

Total \$	49,845
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.2
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.4
Other Staff	0.0
TOTAL FTEs	2.0

St. Luke's Home Health Services

220 North 6th Avenue East

Duluth MN 55805

Out of State

COUNTIES SERVED

Douglas

(218) 279-6111

License Number: 169

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 0

Number of unduplicated patients in 2000 = 44

TOTAL NUMBER OF ADMISSIONS 44**PERCENT ADMISSIONS FROM:**

Private Residences 13.6%

General Hospitals 79.5

Nursing Homes 0.0

Other 6.8

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 46

PERCENT DISCHARGES TO:

Private Residences 91.3%

General Hospitals 0.0

Nursing Homes 0.0

Deaths 2.2

Other 6.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	41	395	9.6
Home Health Aide	5	71	14.2
Physical Therapy	26	207	8.0
Spch/Occ/Resp Therapy	10	63	6.3
Medical Social Service	4	4	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	740	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.3%	Medicare 34.0%
4 to 24 4.5	Medicaid 4.3
25 to 54 27.3	Other Federal 2.1
55 to 64 15.9	State Funds 0.0
65 to 74 15.9	Private Insurance 59.6
75 to 84 31.8	Self Pay 0.0
85 & over 2.3	Other 0.0
	TOTAL PATIENTS 47

Males 40.9% Females 59.1 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 6.8%
Cancer 6.8	Genitourinary Sys. 9.1
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 29.5
Dementia/Alzheimers 0.0	Osteopathies 2.3
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.3	Ill-Defined Cond. 2.3
Paralysis/CP 0.0	Fractures 11.4
Cardiovascular 13.6	Wounds, Burns 2.3
Stroke 4.5	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 9.1

REVENUE

Billings \$	87,197
Disallowances	27,806
Collections	59,391
Other	0
Total	59,391

EXPENSES

Total \$	77,061
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.0
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTEs	0.1

St. Mary's/Duluth Clinic Home Health

516 East Fourth Street

Duluth MN 55805

Out of State

COUNTIES SERVED

Douglas

(218) 786-4004

License Number: 175

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 8

Number of unduplicated patients in 2000 = 149

TOTAL NUMBER OF ADMISSIONS 149**PERCENT ADMISSIONS FROM:**

Private Residences 19.5%

General Hospitals 76.5

Nursing Homes 3.4

Other 0.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	129	760	5.9
Home Health Aide	22	440	20.0
Physical Therapy	32	332	10.4
Spch/Occ/Resp Therapy	10	24	2.4
Medical Social Service	8	11	1.4
Private Duty Nursing	2	360	180.0
Personal Care/PC RN Supv.	6	209	34.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	2	30	15.0
TOTAL	XXXXXXX	2,166	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 148

PERCENT DISCHARGES TO:

Private Residences 89.9%

General Hospitals 7.4

Nursing Homes 1.4

Deaths 0.7

Other 0.7

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.7%	Medicare 34.4%
4 to 24 22.1	Medicaid 24.4
25 to 54 34.9	Other Federal 1.3
55 to 64 6.7	State Funds 0.6
65 to 74 7.4	Private Insurance 29.4
75 to 84 18.8	Self Pay 9.4
85 & over 9.4	Other 0.6
	TOTAL PATIENTS 160

Males 24.2% Females 75.8 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.7%	Digestive Disorders 3.4%
Cancer 8.7	Genitourinary Sys. 2.0
Diabetes 3.4	Preg. & Childbirth 43.6
Diseases of Blood 0.0	Arthropathies 2.7
Dementia/Alzheimers 0.0	Osteopathies 1.3
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 4.7	Ill-Defined Cond. 4.0
Paralysis/CP 0.7	Fractures 2.7
Cardiovascular 9.4	Wounds, Burns 2.0
Stroke 2.7	Compl. of Surgery 2.0
Respiratory 4.0	Other Conditions 2.0

REVENUE

Billings \$	350,450
Disallowances	76,624
Collections	273,826
Other	0
Total	273,826

EXPENSES

Total \$	447,962
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STAFFING**FTEs**

Administrators 0.5

Reg. Nurse Supervisors 2.0

Registered Nurses 10.9

Licensed Practical Nurses 1.6

Home Health Aides 4.8

Physical Therapists 3.6

Occupational Therapists 1.1

Speech Pathologists 0.4

Respiratory Therapists 0.0

Medical Social Workers 0.6

Other Therapeutic Staff 1.2

Personal Care Workers 0.0

Homemakers 0.0

Other Staff 7.6

TOTAL FTEs 34.3

Dickinson Home Health

617 North Stephenson Avenue
Iron Mountain MI 49801

Out of State

COUNTIES SERVED

Florence
Marinette

(906) 779-7820

License Number: 314
Ownership of Agency: County
Title 18 (Medicare) certified? Yes
Title 19 (Medicaid) certified? Yes
Affiliated with a hospital? No
Number of patients visited on 12/7/2000 = 3
Number of unduplicated patients in 2000 = 100

TOTAL NUMBER OF ADMISSIONS 109

PERCENT ADMISSIONS FROM:

Private Residences 91.7%
General Hospitals 1.8
Nursing Homes 0.9
Other 5.5

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	77	880	11.4
Home Health Aide	20	233	11.7
Physical Therapy	38	380	10.0
Spch/Occ/Resp Therapy	13	81	6.2
Medical Social Service	11	23	2.1
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,597	XXXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 113

PERCENT DISCHARGES TO:

Private Residences 73.5%
General Hospitals 18.6
Nursing Homes 0.0
Deaths 1.8
Other 6.2

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 85.0%
4 to 24 1.0	Medicaid 5.0
25 to 54 13.0	Other Federal 0.0
55 to 64 10.0	State Funds 0.0
65 to 74 22.0	Private Insurance 10.0
75 to 84 34.0	Self Pay 0.0
85 & over 20.0	Other 0.0
	TOTAL PATIENTS 100

Males 35.0% Females 65.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 4.0%
Cancer 4.0	Genitourinary Sys. 5.0
Diabetes 5.0	Preg. & Childbirth 0.0
Diseases of Blood 1.0	Arthropathies 8.0
Dementia/Alzheimers 1.0	Osteopathies 1.0
Psychoses/Neuroses 2.0	Perinatal Period 0.0
Central Nervous Sys. 1.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 9.0
Cardiovascular 24.0	Wounds, Burns 8.0
Stroke 4.0	Compl. of Surgery 0.0
Respiratory 4.0	Other Conditions 19.0

REVENUE

Billings \$	205,759
Disallowances	42,192
Collections	163,567
Other	0
Total	163,567

EXPENSES

Total \$	194,766
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	1.1
Physical Therapists	0.2
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	1.2
TOTAL FTEs	4.5

Dickinson-Iron District Health

601 Washington Avenue

Iron River MI 49935

Out of State

COUNTIES SERVED

Florence

Marinette

(906) 265-9913

License Number: 53

Ownership of Agency: County

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 2

Number of unduplicated patients in 2000 = 26

TOTAL NUMBER OF ADMISSIONS 24**PERCENT ADMISSIONS FROM:**

Private Residences 16.7%

General Hospitals 54.2

Nursing Homes 29.2

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 20

PERCENT DISCHARGES TO:

Private Residences 90.0%

General Hospitals 0.0

Nursing Homes 5.0

Deaths 5.0

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	23	358	15.6
Home Health Aide	12	305	25.4
Physical Therapy	13	140	10.8
Spch/Occ/Resp Therapy	6	59	9.8
Medical Social Service	2	2	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	864	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 84.6%
4 to 24 0.0	Medicaid 0.0
25 to 54 7.7	Other Federal 0.0
55 to 64 11.5	State Funds 0.0
65 to 74 15.4	Private Insurance 15.4
75 to 84 30.8	Self Pay 0.0
85 & over 34.6	Other 0.0
	TOTAL PATIENTS 26

Males 23.1% Females 76.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 3.8%
Cancer 11.5	Genitourinary Sys. 3.8
Diabetes 7.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 19.2
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 15.4
Cardiovascular 15.4	Wounds, Burns 0.0
Stroke 3.8	Compl. of Surgery 0.0
Respiratory 15.4	Other Conditions 3.8

REVENUE

Billings \$	81,335
Disallowances	6,212
Collections	75,123
Other	0
Total	75,123

EXPENSES

Total \$	61,885
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.2
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.1
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.4
TOTAL FTEs	1.0

Caring Home Health
 N10567 Grandview Lane
 Ironwood MI 49938

Out of State

COUNTIES SERVED

Iron

(906) 932-2440

License Number: 190
 Ownership of Agency: Nonprofit Corporation
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? No
 Number of patients visited on 12/7/2000 = 11
 Number of unduplicated patients in 2000 = 91

TOTAL NUMBER OF ADMISSIONS 89

PERCENT ADMISSIONS FROM:

Private Residences	9.0%
General Hospitals	60.7
Nursing Homes	11.2
Other	19.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	88	1,470	16.7
Home Health Aide	42	1,223	29.1
Physical Therapy	45	352	7.8
Spch/Occ/Resp Therapy	8	14	1.8
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	16	2,626	164.1
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,685	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 99

PERCENT DISCHARGES TO:

Private Residences	78.8%
General Hospitals	15.2
Nursing Homes	3.0
Deaths	3.0
Other	0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 76.8%
4 to 24 1.1	Medicaid 11.1
25 to 54 6.6	Other Federal 0.0
55 to 64 12.1	State Funds 0.0
65 to 74 19.8	Private Insurance 12.1
75 to 84 37.4	Self Pay 0.0
85 & over 23.1	Other 0.0
	TOTAL PATIENTS 99

Males 41.8% Females 58.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 6.6%
Cancer 4.4	Genitourinary Sys. 4.4
Diabetes 4.4	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 19.8
Dementia/Alzheimers 0.0	Osteopathies 1.1
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 2.2	Ill-Defined Cond. 1.1
Paralysis/CP 2.2	Fractures 3.3
Cardiovascular 22.0	Wounds, Burns 5.5
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 12.1	Other Conditions 11.0

REVENUE

Billings \$	317,853
Disallowances	73,475
Collections	244,378
Other	27
Total	244,405

EXPENSES

Total \$	180,736
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STAFFING

FTEs

Administrators	0.1
Reg. Nurse Supervisors	0.4
Registered Nurses	1.5
Licensed Practical Nurses	0.0
Home Health Aides	0.4
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.8
TOTAL FTEs	3.1

Marquette General Home Health800 East Boulevard
Kingsford MI 49802

Out of State

(906) 779-1844

COUNTIES SERVEDFlorence
Forest
Marinette

License Number: 207

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 6

Number of unduplicated patients in 2000 = 57

TOTAL NUMBER OF ADMISSIONS 45**PERCENT ADMISSIONS FROM:**

Private Residences	33.3%
General Hospitals	60.0
Nursing Homes	4.4
Other	2.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 47

PERCENT DISCHARGES TO:

Private Residences	78.7%
General Hospitals	6.4
Nursing Homes	4.3
Deaths	8.5
Other	2.1

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	57	1,015	17.8
Home Health Aide	11	712	64.7
Physical Therapy	6	50	8.3
Spch/Occ/Resp Therapy	1	1	1.0
Medical Social Service	17	38	2.2
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,816	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 71.9%
4 to 24 14.0	Medicaid 7.0
25 to 54 14.0	Other Federal 0.0
55 to 64 5.3	State Funds 0.0
65 to 74 17.5	Private Insurance 21.1
75 to 84 28.1	Self Pay 0.0
85 & over 21.1	Other 0.0
	TOTAL PATIENTS 57

Males 42.1% Females 57.9 %

PRIMARY DIAGNOSIS

Infectious Disorders	0.0%	Digestive Disorders	7.0%
Cancer	14.0	Genitourinary Sys.	1.8
Diabetes	3.5	Preg. & Childbirth	1.8
Diseases of Blood	1.8	Arthropathies	7.0
Dementia/Alzheimers	0.0	Osteopathies	1.8
Psychoses/Neuroses	0.0	Perinatal Period	1.8
Central Nervous Sys.	1.8	Ill-Defined Cond.	7.0
Paralysis/CP	0.0	Fractures	10.5
Cardiovascular	19.3	Wounds, Burns	7.0
Stroke	5.3	Compl. of Surgery	0.0
Respiratory	7.0	Other Conditions	1.8

REVENUE

Billings	\$	153,640
Disallowances		22,990
Collections		130,650
Other		0
Total		130,650

EXPENSES

Total	\$	94,523
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STAFFING**FTEs**

Administrators	0.2
Reg. Nurse Supervisors	0.2
Registered Nurses	0.2
Licensed Practical Nurses	1.0
Home Health Aides	0.7
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.4
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.7
TOTAL FTEs	3.4

Marquette General Home Health & Hospice

1101 11th Avenue, Suite 4

Menominee MI 49858

Out of State

COUNTIES SERVED

Marinette

Oconto

(906) 863-7877

License Number: 26

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 125

TOTAL NUMBER OF ADMISSIONS 117**PERCENT ADMISSIONS FROM:**

Private Residences 28.2%

General Hospitals 70.1

Nursing Homes 1.7

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 110

PERCENT DISCHARGES TO:

Private Residences 71.8%

General Hospitals 0.0

Nursing Homes 8.2

Deaths 13.6

Other 6.4

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	122	3,022	24.8
Home Health Aide	54	2,028	37.6
Physical Therapy	23	222	9.7
Spch/Occ/Resp Therapy	4	10	2.5
Medical Social Service	47	82	1.7
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	18	356	19.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	5,720	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.8%	Medicare 85.6%
4 to 24 8.0	Medicaid 8.0
25 to 54 10.4	Other Federal 0.0
55 to 64 7.2	State Funds 0.0
65 to 74 20.0	Private Insurance 6.4
75 to 84 27.2	Self Pay 0.0
85 & over 26.4	Other 0.0
	TOTAL PATIENTS 125

Males 40.8% Females 59.2 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.8%	Digestive Disorders 3.2%
Cancer 12.8	Genitourinary Sys. 8.0
Diabetes 4.0	Preg. & Childbirth 0.0
Diseases of Blood 3.2	Arthropathies 8.0
Dementia/Alzheimers 0.0	Osteopathies 3.2
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 4.8	Ill-Defined Cond. 5.6
Paralysis/CP 2.4	Fractures 4.8
Cardiovascular 13.6	Wounds, Burns 11.2
Stroke 1.6	Compl. of Surgery 0.8
Respiratory 6.4	Other Conditions 5.6

REVENUE

Billings \$	647,749
Disallowances	174,128
Collections	473,621
Other	0
Total	473,621

EXPENSES

Total \$	495,196
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STAFFING**FTEs**

Administrators	0.3
Reg. Nurse Supervisors	2.0
Registered Nurses	2.6
Licensed Practical Nurses	0.8
Home Health Aides	1.6
Physical Therapists	0.6
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.4
Other Therapeutic Staff	0.0
Personal Care Workers	1.0
Homemakers	0.0
Other Staff	2.5
TOTAL FTEs	11.8

Hiawatha Homecare

1610 West 3rd Street
Red Wing MN 55066

Out of State

COUNTIES SERVED

Pierce
St. Croix

(651) 388-2223

License Number: 340

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 9

Number of unduplicated patients in 2000 = 25

TOTAL NUMBER OF ADMISSIONS 20

PERCENT ADMISSIONS FROM:

Private Residences	45.0%
General Hospitals	55.0
Nursing Homes	0.0
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 16

PERCENT DISCHARGES TO:

Private Residences	93.8%
General Hospitals	6.3
Nursing Homes	0.0
Deaths	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	18	114	6.3
Home Health Aide	1	2	2.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	6	2,317	386.2
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	2,433	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 24.0%	Medicare 0.0%
4 to 24 24.0	Medicaid 24.0
25 to 54 32.0	Other Federal 0.0
55 to 64 8.0	State Funds 0.0
65 to 74 12.0	Private Insurance 72.0
75 to 84 0.0	Self Pay 4.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 25

Males 48.0% Females 52.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 8.0%	Digestive Disorders 16.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 16.0
Diseases of Blood 4.0	Arthropathies 4.0
Dementia/Alzheimers 0.0	Osteopathies 4.0
Psychoses/Neuroses 8.0	Perinatal Period 0.0
Central Nervous Sys. 4.0	Ill-Defined Cond. 4.0
Paralysis/CP 4.0	Fractures 0.0
Cardiovascular 0.0	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 28.0	Other Conditions 0.0

REVENUE

Billings	\$ 1,074,570
Disallowances	1,115,160
Collections	-40,590
Other	0
Total	-40,590

EXPENSES

Total	\$ 668,812
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	6.3
Licensed Practical Nurses	3.5
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.0
TOTAL FTEs	11.8

Red Wing Regional Home Health

434 West 4th Street, #200

Red Wing MN 55066

Out of State

COUNTIES SERVED

Pepin

Pierce

(651) 385-3410

License Number: 215

Ownership of Agency: Nonprofit Private

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? Yes

Number of patients visited on 12/7/2000 = 1

Number of unduplicated patients in 2000 = 25

TOTAL NUMBER OF ADMISSIONS 30**PERCENT ADMISSIONS FROM:**

Private Residences 10.0%

General Hospitals 86.7

Nursing Homes 3.3

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 28

PERCENT DISCHARGES TO:

Private Residences 89.3%

General Hospitals 0.0

Nursing Homes 0.0

Deaths 0.0

Other 10.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	25	280	11.2
Home Health Aide	11	91	8.3
Physical Therapy	11	75	6.8
Spch/Occ/Resp Therapy	5	53	10.6
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	499	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 42.9%
4 to 24 4.0	Medicaid 0.0
25 to 54 20.0	Other Federal 2.9
55 to 64 32.0	State Funds 0.0
65 to 74 32.0	Private Insurance 45.7
75 to 84 12.0	Self Pay 8.6
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 35

Males 48.0% Females 52.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 4.0%	Digestive Disorders 0.0%
Cancer 16.0	Genitourinary Sys. 0.0
Diabetes 8.0	Preg. & Childbirth 0.0
Diseases of Blood 4.0	Arthropathies 4.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 0.0
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 20.0	Wounds, Burns 8.0
Stroke 8.0	Compl. of Surgery 16.0
Respiratory 12.0	Other Conditions 0.0

REVENUE

Billings \$	148,751
Disallowances	15,434
Collections	133,317
Other	6,183
Total	139,500

EXPENSES

Total \$	161,219
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.1
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTEs	0.3

Interim Healthcare-Rockford

5411 East State Street, Suite 3

Rockford IL 61108

Out of State

COUNTIES SERVED

Rock

(800) 427-4433

License Number: 248

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 3

Number of unduplicated patients in 2000 = 3

TOTAL NUMBER OF ADMISSIONS 0**PERCENT ADMISSIONS FROM:**

Private Residences 0.0%

General Hospitals 0.0

Nursing Homes 0.0

Other 0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 1

PERCENT DISCHARGES TO:

Private Residences 100.0%

General Hospitals 0.0

Nursing Homes 0.0

Deaths 0.0

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	0	0	0.0
Home Health Aide	0	0	0.0
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	2	548	274.0
Personal Care/PC RN Supv.	1	476	476.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	1,024	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 0.0%
4 to 24 66.7	Medicaid 100.0
25 to 54 0.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 33.3	Private Insurance 0.0
75 to 84 0.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 3

Males 66.7% Females 33.3 %

PRIMARY DIAGNOSIS

PRIMARY DIAGNOSIS	
Infectious Disorders	0.0%
Cancer	0.0
Diabetes	0.0
Diseases of Blood	0.0
Dementia/Alzheimers	0.0
Psychoses/Neuroses	0.0
Central Nervous Sys.	66.7
Paralysis/CP	0.0
Cardiovascular	0.0
Stroke	0.0
Respiratory	0.0

PRIMARY DIAGNOSIS	
Digestive Disorders	0.0%
Genitourinary Sys.	0.0
Preg. & Childbirth	0.0
Arthropathies	0.0
Osteopathies	0.0
Perinatal Period	0.0
Ill-Defined Cond.	33.3
Fractures	0.0
Wounds, Burns	0.0
Compl. of Surgery	0.0
Other Conditions	0.0

REVENUE

Billings	\$	260,629
Disallowances		46,019
Collections		214,610
Other		0
Total		214,610

EXPENSES

Total	\$	477,955
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	1.0
Registered Nurses	2.4
Licensed Practical Nurses	0.8
Home Health Aides	0.6
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.6
Homemakers	0.0
Other Staff	4.0
TOTAL FTEs	10.3

Lakeview Hospital Homecare

5620 Memorial Avenue North

Stillwater MN 55082

Out of State

COUNTIES SERVED

Polk

St. Croix

(651) 430-3320

License Number: 260

Ownership of Agency: Nonprofit Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 4

Number of unduplicated patients in 2000 = 269

TOTAL NUMBER OF ADMISSIONS 333**PERCENT ADMISSIONS FROM:**

Private Residences 3.9%

General Hospitals 52.0

Nursing Homes 9.9

Other 34.2

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 360

PERCENT DISCHARGES TO:

Private Residences 89.2%

General Hospitals 7.2

Nursing Homes 2.5

Deaths 1.1

Other 0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	200	2,230	11.2
Home Health Aide	80	1,736	21.7
Physical Therapy	60	495	8.3
Spch/Occ/Resp Therapy	13	116	8.9
Medical Social Service	3	27	9.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	4,604	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 2.2%	Medicare 72.1%
4 to 24 1.5	Medicaid 1.1
25 to 54 13.0	Other Federal 0.0
55 to 64 8.6	State Funds 0.0
65 to 74 19.3	Private Insurance 24.9
75 to 84 32.3	Self Pay 1.9
85 & over 23.0	Other 0.0
	TOTAL PATIENTS 269

Males 30.1% Females 69.9 %

PRIMARY DIAGNOSIS

Infectious Disorders 11.9%	Digestive Disorders 5.2%
Cancer 5.9	Genitourinary Sys. 1.1
Diabetes 3.7	Preg. & Childbirth 19.7
Diseases of Blood 0.0	Arthropathies 10.0
Dementia/Alzheimers 1.9	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 4.1	Ill-Defined Cond. 1.9
Paralysis/CP 0.0	Fractures 10.0
Cardiovascular 12.3	Wounds, Burns 1.9
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 5.9	Other Conditions 4.5

REVENUE

Billings \$	595,362
Disallowances	106,743
Collections	488,619
Other	0
Total	488,619

EXPENSES

Total \$	500,813
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STAFFING**FTEs**

Administrators	1.0
Reg. Nurse Supervisors	0.8
Registered Nurses	2.3
Licensed Practical Nurses	0.0
Home Health Aides	3.0
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.5
TOTAL FTEs	7.6

St. Elizabeth Home Health Center

1200 West 5th Grant Boulevard

Wabasha MN 55981

Out of State

COUNTIES SERVED

Buffalo

Pepin

(651) 565-5577

License Number: 356

Ownership of Agency: Nonprofit Church/Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 7

Number of unduplicated patients in 2000 = 23

TOTAL NUMBER OF ADMISSIONS 21**PERCENT ADMISSIONS FROM:**

Private Residences 19.0%

General Hospitals 66.7

Nursing Homes 4.8

Other 9.5

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 23

PERCENT DISCHARGES TO:

Private Residences 73.9%

General Hospitals 13.0

Nursing Homes 0.0

Deaths 4.3

Other 8.7

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	23	269	11.7
Home Health Aide	6	268	44.7
Physical Therapy	2	3	1.5
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	10	265	26.5
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	805	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 34.8%
4 to 24 0.0	Medicaid 30.4
25 to 54 8.7	Other Federal 0.0
55 to 64 8.7	State Funds 0.0
65 to 74 21.7	Private Insurance 8.7
75 to 84 30.4	Self Pay 17.4
85 & over 30.4	Other 8.7
	TOTAL PATIENTS 23

Males 69.6% Females 30.4 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 4.3	Genitourinary Sys. 8.7
Diabetes 8.7	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 13.0
Dementia/Alzheimers 0.0	Osteopathies 4.3
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 4.3	Ill-Defined Cond. 8.7
Paralysis/CP 0.0	Fractures 0.0
Cardiovascular 13.0	Wounds, Burns 13.0
Stroke 0.0	Compl. of Surgery 0.0
Respiratory 21.7	Other Conditions 0.0

REVENUE

Billings \$	40,364
Disallowances	2,930
Collections	37,434
Other	0
Total	37,434

EXPENSES

Total \$	23,260
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STAFFING**FTEs**

Administrators	0.0
Reg. Nurse Supervisors	0.0
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.1
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.2
Homemakers	0.0
Other Staff	0.1
TOTAL FTEs	0.5

Winona Health Home Care
 175 East Wabasha Street
 Winona WI 55987

Out of State

COUNTIES SERVED
 Buffalo

(507) 457-4468

License Number: 318
 Ownership of Agency: Nonprofit Corporation
 Title 18 (Medicare) certified? Yes
 Title 19 (Medicaid) certified? Yes
 Affiliated with a hospital? Yes
 Number of patients visited on 12/7/2000 = 5
 Number of unduplicated patients in 2000 = 19

TOTAL NUMBER OF ADMISSIONS 19

PERCENT ADMISSIONS FROM:

Private Residences	47.4%
General Hospitals	47.4
Nursing Homes	5.3
Other	0.0

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 16

PERCENT DISCHARGES TO:

Private Residences	81.3%
General Hospitals	12.5
Nursing Homes	0.0
Deaths	6.3
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	17	171	10.1
Home Health Aide	6	104	17.3
Physical Therapy	5	66	13.2
Spch/Occ/Resp Therapy	1	1	1.0
Medical Social Service	2	2	1.0
Private Duty Nursing	0	0	0.0
Personal Care/PC RN Supv.	0	0	0.0
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	344	XXXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 0.0%	Medicare 52.4%
4 to 24 0.0	Medicaid 14.3
25 to 54 10.5	Other Federal 9.5
55 to 64 21.1	State Funds 0.0
65 to 74 36.8	Private Insurance 23.8
75 to 84 26.3	Self Pay 0.0
85 & over 5.3	Other 0.0
	TOTAL PATIENTS 21

Males 47.4% Females 52.6 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 5.3%
Cancer 15.8	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 10.5
Dementia/Alzheimers 0.0	Osteopathies 10.5
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 0.0	Ill-Defined Cond. 5.3
Paralysis/CP 0.0	Fractures 5.3
Cardiovascular 31.6	Wounds, Burns 0.0
Stroke 0.0	Compl. of Surgery 5.3
Respiratory 5.3	Other Conditions 5.3

REVENUE

Billings \$	48,410
Disallowances	6,882
Collections	41,528
Other	693
Total	42,221

EXPENSES

Total \$	41,691
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STAFFING

FTEs

Administrators	0.0
Reg. Nurse Supervisors	0.1
Registered Nurses	0.1
Licensed Practical Nurses	0.0
Home Health Aides	0.2
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	0.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTEs	0.4

Caregivers Home Health

1037 Lake Avenue
Woodstock IL 60098

Out of State

(815) 338-2340

COUNTIES SERVED

Kenosha
Rock
Walworth

License Number: 257

Ownership of Agency: Proprietary Corporation

Title 18 (Medicare) certified? Yes

Title 19 (Medicaid) certified? Yes

Affiliated with a hospital? No

Number of patients visited on 12/7/2000 = 12

Number of unduplicated patients in 2000 = 20

TOTAL NUMBER OF ADMISSIONS 8

PERCENT ADMISSIONS FROM:

Private Residences	37.5%
General Hospitals	62.5
Nursing Homes	0.0
Other	0.0

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	9	112	12.4
Home Health Aide	9	1,196	132.9
Physical Therapy	0	0	0.0
Spch/Occ/Resp Therapy	0	0	0.0
Medical Social Service	0	0	0.0
Private Duty Nursing	5	522	104.4
Personal Care/PC RN Supv.	26	1,374	52.8
Other Home Health Care	0	0	0.0
Homemkr & Other Non HH	0	0	0.0
TOTAL	XXXXXXX	3,204	XXXXX

TOTAL NUMBER OF DISCHARGES

(Including Deaths) 8

PERCENT DISCHARGES TO:

Private Residences	25.0%
General Hospitals	37.5
Nursing Homes	37.5
Deaths	0.0
Other	0.0

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 10.0%	Medicare 0.0%
4 to 24 60.0	Medicaid 100.0
25 to 54 15.0	Other Federal 0.0
55 to 64 0.0	State Funds 0.0
65 to 74 5.0	Private Insurance 0.0
75 to 84 10.0	Self Pay 0.0
85 & over 0.0	Other 0.0
	TOTAL PATIENTS 30

Males 45.0% Females 55.0 %

PRIMARY DIAGNOSIS

Infectious Disorders 0.0%	Digestive Disorders 0.0%
Cancer 0.0	Genitourinary Sys. 0.0
Diabetes 0.0	Preg. & Childbirth 0.0
Diseases of Blood 0.0	Arthropathies 5.0
Dementia/Alzheimers 0.0	Osteopathies 0.0
Psychoses/Neuroses 0.0	Perinatal Period 0.0
Central Nervous Sys. 25.0	Ill-Defined Cond. 0.0
Paralysis/CP 40.0	Fractures 5.0
Cardiovascular 5.0	Wounds, Burns 5.0
Stroke 5.0	Compl. of Surgery 0.0
Respiratory 0.0	Other Conditions 10.0

REVENUE

Billings \$	292,215
Disallowances	71,643
Collections	220,572
Other	0
Total	220,572

EXPENSES

Total \$	216,311
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STAFFING**FTEs**

Administrators	0.1
Reg. Nurse Supervisors	0.0
Registered Nurses	1.8
Licensed Practical Nurses	0.6
Home Health Aides	1.8
Physical Therapists	0.0
Occupational Therapists	0.0
Speech Pathologists	0.0
Respiratory Therapists	0.0
Medical Social Workers	0.0
Other Therapeutic Staff	0.0
Personal Care Workers	1.0
Homemakers	0.0
Other Staff	0.1
TOTAL FTEs	5.3

STATE OF WISCONSIN TOTALS

Number of patients visited on 12/7/2000 = 7,243

Number of unduplicated patients in 2000 = 72,046

SERVICES PROVIDED	NO. OF PATIENTS	NO. OF VISITS	VISITS PER PATIENT
Skilled Nursing	53,691	830,395	15.5
Home Health Aide	16,497	685,057	41.5
Physical Therapy	21,299	166,051	7.8
Spch/Occ/Resp Therapy	7,838	56,537	7.2
Medical Social Service	5,388	11,549	2.1
Private Duty Nursing	853	73,087	85.7
Personal Care/PC RN Supv.	13,974	1,404,334	100.5
Other Home Health Care	256	6,251	24.4
Homemkr & Other Non HH	1,913	144,075	75.3
TOTAL	XXXXXX	3,436,034	XXXXX

AGE AND SEX OF PATIENTS	PATIENT REIMBURSEMENT SOURCE
Under 4 5.4	Medicare 55.3%
4 to 24 3.9	Medicaid 14.3
25 to 54 15.3	Other Federal 0.5
55 to 64 9.9	State Funds 1.2
65 to 74 18.2	Priv. Insurance 22.1
75 to 84 28.2	Self Pay 5.2
85 & over 19.2	Other 0.9
	TOTAL PATIENTS 80,924

Males 41.0 % Females 59.0 %

TOTAL NUMBER OF ADMISSIONS 68,848

PERCENT ADMISSIONS FROM:

Private Residences	23.9%
General Hospitals	60.5
Nursing Homes	6.4
Other	9.2

TOTAL NUMBER OF DISCHARGES

(INCLUDING DEATHS) 68,847

PERCENT DISCHARGES TO:

Private Residences	72.9
General Hospitals	13.7
Nursing Homes	3.8
Deaths	2.5
Other	7.1

STAFFING

FTES

Administrators	134.5
Reg. Nurse Supervisors	217.1
Registered Nurses	1117.8
Licensed Practical Nurses	219.1
Home Health Aides	978.1
Physical Therapists	124.8
Occupational Therapists	33.7
Speech Pathologists	10.0
Respiratory Therapists	4.0
Medical Social Workers	45.3
Other Therapeutic Staff	12.8
Personal Care Workers	1006
Homemakers	144.4
Other Staff	719.0
TOTAL FTES	4766.3

PRIMARY DIAGNOSIS

REVENUE

Infectious Disorders 1.1%	Digestive Disorders 3.3%
Cancer 8.4	Genitourinary Sys. 2.9
Diabetes 4.1	Preg. & Childbirth 1.1
Diseases of Blood 1.2	Arthropathies 10.3
Dementia/Alzheimers 0.9	Osteopathies 1.7
Psychoses/Neuroses 1.5	Perinatal Period 3.6
Central Nervous Sys. 3.0	Ill-Defined Cond. 6.5
Paralysis/CP 1.4	Fractures 5.5
Cardiovascular 15.3	Wounds, Burns 4.6
Stroke 3.1	Compl. of Surgery 2.2
Respiratory 6.6	Other Conditions 11.8

Billings	\$240,915,277
Disallowances	50,735,820
Collections	190,179,457
Other	3,886,678
Total	194,066,135

EXPENSES

Total \$210,163,249

Indices of Home Health Agency Profiles

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8	266	Interim Healthcare	Green Bay	Brown
9	35	St. Vincent Hospital Home Health Care	Green Bay	Brown
10	311	Woodside Home Health Agency	Green Bay	Brown
11	41	Burnett County DHHS	Siren	Burnett
12	42	Calumet County Health Department/Home Health Agency	Chilton	Calumet
13	174	Calumet Medical Center Health Care Service	Chilton	Calumet
14	43	Chippewa County Department/Public Health	Chippewa Falls	Chippewa
15	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
16	44	Clark County Home Care Agency	Neillsville	Clark
17	146	Memorial Hospital, Inc.	Neillsville	Clark
18	328	Divine Savior Home Care	Portage	Columbia
19	46	Prairie du Chien Memorial Hospital Home Health	Prairie du Chien	Crawford
20	316	Catalyst, Inc.	Madison	Dane
21	176	Home Health United-VNS	Madison	Dane
22	294	Independent Health Care, Inc.	Madison	Dane
23	206	Interim Healthcare of Madison	Madison	Dane
24	222	Meriter Home Care Agency	Madison	Dane
25	252	University Hospital Home Health Agency	Madison	Dane
26	341	Stoughton Hospital Home Health United	Stoughton	Dane
27	188	Hillside Home Health	Beaver Dam	Dodge
28	134	Marquardt Memorial Manor, Inc.	Watertown	Dodge
29	165	Watertown Memorial Hospital-Home Health Program	Watertown	Dodge
30	187	Door County Memorial Home Health	Sturgeon Bay	Door
31	1008	Porter-Kiehnau Home Care System	Sturgeon Bay	Door
32	50	Douglas County Health Department-Home Health Care	Superior	Douglas
33	172	The Dove, Inc.	Superior	Douglas
34	310	Aurora Community Health, Inc.	Menomonie	Dunn
35	51	Dunn County Home Health Care	Menomonie	Dunn
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42	55	St. Agnes Hospital-Home Care Service	Fond du Lac	Fond du Lac
43	270	Country Care Connection	Crandon	Forest
44	56	Forest County Health Department	Crandon	Forest
45	57	Grant County Home Nursing Service	Lancaster	Grant
46	330	Homeward Bound Home Health	Lancaster	Grant
47	142	The Monroe Clinic Home Care	Monroe	Green
48	235	CHN Home Care	Berlin	Green Lake
49	60	Allied Home Care	Dodgeville	Iowa
50	219	Pine View Home Health	Black River Falls	Jackson
51	137	Fort Atkinson Memorial Hlth. Service Home Health Agency	Fort Atkinson	Jefferson
52	63	Jefferson County Health Department	Jefferson	Jefferson
53	135	KJM Home Health Care Agency	Watertown	Jefferson
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56	65	Kenosha VNA, Inc.	Kenosha	Kenosha
57	141	Franciscan Skemp Medical Center HHS	La Crosse	La Crosse
58	67	Gundersen Lutheran Visiting Nurse, Inc.	La Crosse	La Crosse
59	66	La Crosse County Health Department	La Crosse	La Crosse
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64	277	Interim Healthcare	Wausau	Marathon
65	73	VNA Home Health, Inc.	Wausau	Marathon
66	1005	Caregivers Home Health	Marinette	Marinette
67	256	Northland Lutheran Home Health Service, Inc.	Marinette	Marinette
68	241	Northland Home Health Agency	Westfield	Marquette
69	150	Horizon Home Care & Hospice	Brown Deer	Milwaukee
70	1014	Amore Home Care, Inc.	Greenfield	Milwaukee
71	306	ANS Home Health Services, Inc.	Milwaukee	Milwaukee
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80	278	Preferred Home Health Services, LLC	Milwaukee	Milwaukee
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83	312	"Your Nurse" Home Health Care, Inc.	Milwaukee	Milwaukee
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92	86	Dr. Kate Newcomb Home Health Agency	Woodruff	Oneida
93	89	Ozaukee County Public Health Department	Port Washington	Ozaukee
94	90	Pepin County Nursing Service	Durand	Pepin
95	91	Pierce County Home Care	Ellsworth	Pierce
96	349	Spring Valley Healthcare Center Home Health Service	Spring Valley	Pierce
97	92	Polk County Home Care Program	Balsam Lake	Polk
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100	238	Flambeau Home Health & Hospice	Phillips	Price
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102	305	SAI Home Health Care, Inc.	Racine	Racine
103	245	Alpha Home Health Care	Beloit	Rock
104	98	At-Home Healthcare	Beloit	Rock
105	159	Memorial Community Hospital Home Health Agency	Edgerton	Rock
106	99	Mercy Assisted Care, Inc.	Janesville	Rock
107	295	Indianhead Home Health Care Agency	Ladysmith	Rusk
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118	125	Home Care Network, Inc.	Lake Geneva	Walworth
119	304	Hearts of Gold, Inc.	Shell Lake	Washburn
120	324	Indianhead Medical Center, Inc.	Shell Lake	Washburn
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122	111	Washburn County Health Department	Spooner	Washburn
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124	274	Sunrise Home Health Care, Inc.	Brookfield	Waukesha
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126	170	Prohealth Home Care	Hartland	Waukesha
127	240	Hannah Home Health Care, Inc.	Mukwonago	Waukesha
128	247	Coram Alternate Site Services, Inc.	New Berlin	Waukesha
129	220	Lutheran Social Services Home Care	Waukesha	Waukesha
130	300	St. Joseph Home Care	New London	Waupaca
131	24	REM Health of Wisconsin, Inc.	Waupaca	Waupaca
132	114	Waupaca County Department/Human Services	Waupaca	Waupaca
133	157	Preferred Home Health Care, Inc.	Menasha	Winnebago
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135	214	Affiliated Home Care, Inc.	Oshkosh	Winnebago
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138	182	Ministry Home Care, Inc.	Marshfield	Wood
139	162	Health Care At Home, Inc.	Wisconsin Rapids	Wood
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124	274	Sunrise Home Health Care, Inc.	Brookfield	Waukesha
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69	150	Horizon Home Care & Hospice	Brown Deer	Milwaukee
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15	158	St. Joseph's Hospital Home Health Agency	Chippewa Falls	Chippewa
43	270	Country Care Connection	Crandon	Forest
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45	57	Grant County Home Nursing Service	Lancaster	Grant
46	330	Homeward Bound Home Health	Lancaster	Grant
20	316	Catalyst, Inc.	Madison	Dane
21	176	Home Health United-VNS	Madison	Dane
22	294	Independent Health Care, Inc.	Madison	Dane
23	206	Interim Healthcare of Madison	Madison	Dane
24	222	Meriter Home Care Agency	Madison	Dane
25	252	University Hospital Home Health Agency	Madison	Dane
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